# STATE OF RHODE ISLAND DEPARTMENT OF CHILDREN, YOUTH AND FAMILIES

### PUBLIC NOTICE OF PROPOSED RULE-MAKING

In accordance with Rhode Island General Law (RIGL) 42-35 and 42-72-5, notice is hereby given that the Department of Children, Youth and Families proposes to amend the following Department rule:

# **Child Care Program Regulations for Licensure**

This rule is amended for clarity and measurability in order to standardize Rhode Island's Child Care and School Age programs with national standards and nationally recognized best practice. Changes have been made to terms, names and position titles to align with the Rhode Island Department of Education, and national trends. Standards have been regrouped within sections of the rule or moved to new sections. In the amendment of this rule, consideration was given to the following: (1) alternative approaches and (2) overlap or duplication with other statutory and regulatory provisions. No alternative approach or duplication or overlap was identified based upon available information.

This amended rule is accessible on the DCYF website (http://www.dcyf.ri.gov) or the Rhode Island. Secretary of State's website (http://www.sec.state.ri.us/ProposedRules/).

A public hearing will be held to consider the proposed rule amendment on Thursday, July 11, 2013 at 6:00 PM at the DaVinci Center for Community Progress, Inc., 470 Charles Street, Providence, RI 02904. Interested persons should submit data, views or written comments by Thursday, July 25th, 2013 to Sarah St. Jacques, Policy Office, Department of Children, Youth and Families, 101 Friendship Street, Providence, Rhode Island 02903, <a href="mailto:sarah.st.jacques@dcyf.ri.gov">sarah.st.jacques@dcyf.ri.gov</a>.

# STATE OF RHODE ISLAND DEPARTMENT OF CHILDREN, YOUTH AND FAMILIES



# Child Care Program Regulations for Licensure

**July 2013** 

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# Rhode Island Department of Children, Youth and Families Child Care Childcare Center Program Regulations for Licensure

# **SECTION ONE - GENERAL PROVISIONS**

# I. LEGAL BASIS

Rhode Island General Laws RIGL 42-72-5 – Department of Children, Youth and Families RIGL 42-72.1 – Licensing and Monitoring of Child Care Providers and Child-Placing Agencies

RIGL 40-13.2 – Certification of Child Care and Youth Serving Agency Workers RIGL 23-28.15 – CHILD CARE PROGRAMS

# II. DEFINITION

### THE LICENSING PROCESS

The primary purpose of licensing a child care\_childcare centerprogram is to safeguard the well-being of the children served. Granting a license means there is clear evidence that the building and grounds are safe\_i; that staff are appropriately trained and responsible\_i; and that the program chall, in practice, reflects an understanding of the healthy growth and development of children. Further, the The license is meant to be an provides assurance to families and the community that the children are being cared for in a safe, healthy environment where appropriate activities, time schedules, food, materials, equipment and that staff are consistently available and are used for encourageing and supporting the children's physical, social, emotional, and intellectual growth.

Licensing is a method of regulation designed to implement the state's obligation to the families whose children attend child care centers. A license is granted after a detailed evaluation of the facility and program has shown that conformity to the established regulations prevails. The regulations used for this evaluation are described in SECTION II of this publication. An application for licensure may be obtained from the Child Care Licensing Office of the Rhode Island Department of Children, Youth and Families.

# **SECTION TWO - LICENSING PROVISIONS**

# I. APPLICATION PROCESS

- A. A: Procedure for obtaining a license
  - CONSULTATION Any person, firm, corporation, association or agency interested in opening a child-care centerprogram program for infants, toddlers, and preschoolers shall contacts the Department of Children, Youth and Families' (hereinafter, the Department) Child Care Licensing Supervisor Department's licensing unit for assignment to a licensing worker.
  - An initial consultation will beis held upon request to review the regulations, discuss the need for such a program in the chosen community, review the proposed program, and examine the financial resources available.

- A preliminary visit to the proposed facility will beis made by the licensing worker to determine the feasibility of achieving compliance with regulations.
- B. Application Packet-
  - 1. An application for licensure shall beis filed on the prescribed forms provided by the Child Care Department's ILicensing office. Office.
  - A separate application shall be is filed for each physical facility to be operated.
  - \_\_\_\_\_A complete application, including all supporting documentation, shall beis submitted.
  - 3. The application shall includes, but not be not limited to, the following:
    - <u>ha.</u> the full name, address, mailing address, email address, and phone number of the prospective <u>centerprogram</u>;
    - \_b. the full name and address of the applicant;
    - information on incorporation, including, if incorporating, the names, addresses, and titles of the board of directors of the corporation;
    - information on the building in which the centerprogram program will be housed, including sketches of the indoor area showing the activity rooms which willto be used for child-care, the kitchen or food preparation area, the bathrooms for children and staff, and the office space;
    - information on the outdoor play area, including a sketch of this area showing accessibility to the building, and the rooms used for child care;
    - information on the number and ages of children to be served, age groupings, and staff/child ratio;
    - <u>→g.</u> information on staffing, including the name and qualifications of the administrator, education coordinator, and other identified staff:
    - →h. medical information on staff:
    - employment history and criminal record information on staff, fingerprinting, FBI screening and CPS screening;
    - information on the program, including the daily schedule of activities, the philosophy of the program, and the developmental goals and objectives on which the program will be based;
    - a listing of the equipment and materials, both indoor and outdoor, available for the implementation of the program;
    - ☐ information on the daily feeding program;
    - financial information, including a statement of the financial assets, liabilities and net worth of the applicant, the means of financing, and an anticipated yearly budget for the program; and
    - <u>n.</u> a statement signed by the applicant, acknowledging that they have read, and agree to comply with, the REGULATIONS FOR LICENSUREse regulations.
- C. Inspection approvals-
  - 1. Prior to the issuance of a license.
    - documentation of the facility'sy being in compliance with local zoning ordinances and with the applicable sections of the setate feire, buBuilding, health and seanitation ceodes shall be submitted.

<u>a.</u>

- <u>LICENSING VISIT</u> Prior to the issuance of a license, a visit is will be made to the facility by the licensing worker in order to determine compliance with the regulations and to determine velop the maximum capacity for the program.
- <u>5.2.</u> ACTION ON APPLICATION FOR LICENSURE Upon receipt of a completed application, inspection approvals, and a report from the licensing worker addressing compliance with the regulations, one of the following actions shall be takenoccurs:
  - a. (1) ilssuance of a perovisional License or;
  - b. (2) dDenial of ILicensure.

### B: Provisional license

\_A provisional license shall be issued to newly established programs upon successful completion of the application process. This license is granted for a limited period of time, not to exceed six (6) months. The purpose of the provisional license is to allow the licensee time to develop an operational program which meets the needs of the children served and to demonstrate that the program is in compliance with the regulations.

Prior to the expiration of a provisional license, the operation of the child care center shall be subjected to a complete evaluation to determine compliance with the regulations.

# II. LICENSE

# A. Provisional license

- 1. A provisional license is issued to a newly established programs upon successful completion of the application process.
- 2. This license is granted for a limited period, not to exceed six months.
- 3. The provisional license allows the licensee time to develop an operational program that meets the needs of the children served and to demonstrate the program complies with these regulations.
- 4. Prior to the expiration of a provisional license, the operation of the childcare program is evaluated to determine compliance with the regulations.

# B. C: Full license

- A full license shall beis issued to a program that is determined to be in compliesance with these regulations.
- The license is valid for a period not to exceed one year, expiring annually on July 31.

## C. D: Probationary license

- A probationary license shall beis issued in place of a full license at any time when a licensee is temporarily unable to comply with a regulation or regulations, provided that the area or areas of noncompliance do not present an immediate threat to the health and well-being of the children.
- Before a probationary license can beis issued, the licensee must submits written documentation that the area(s) of non-compliance do not present a threat to the health and well-being of the children and a plan to correct the area(s) of non-compliance.

3. This plan must beis approved by the Child Care Department's Licensing Administrator or designee Supervisor.

# III. LICENSE RENEWAL

# A. E:Renewal of license

- 1. RENEWAL APPLICATION A licensee shall files a renewal application on the prescribed forms provided by the Child Care Department's Licensing Office at least sixty (60) days prior to the expiration of the license.
- 3.2. INSPECTION APPROVALS—Current inspection approvals shall beare submitted prior to renewal to verify that the facility remains in compliance with the appropriate sections of the sState Fire, bBuilding, hHealth and sSanitation cCodes.
- 6.3. ACTION ON APPLICATION FOR RENEWAL OF LICENSE Upon receipt of a renewal application and appropriate inspection approvals, one of the following actions will be taken:
  - a. (1) ilssuance of a Full License; or
  - b. (2) ilssuance of a Probationary License; or
  - c. (3)-dDenial of Licensure.

# F. Monitoring visits

Licensing workers from the Child Care Department's Licensing Office unit will make periodic unannounced monitoring visits to the center program during the hours of operation in order to determine compliance with the regulations.

# IV. DENIAL, REVOCATION OR SUSPENSION OF LICENSE

- A. G. Revocation or Deenial of a License
  - A license shall beis denied or revoked for failure to comply with these regulations contained herein, or when there is evidence that the operation of the day child-care centerprogram will poses a threat to the health and/or safety of children enrolled.
  - The Administrator of Licensing administrator will-notifiesy an applicant or licensee in writing of the Department's decision to deny or revoke a license.
  - The written notification will-contains the reason for the denial or revocation.
  - 4. Notice of denial or revocation will beis sent to the applicant or licensee at least ten-(10) days prior to the effective date of the action, unless there is sufficient evidence to warrant immediate closure.
- B. When such circumstances exist! necessary, the licensing administrator Administrator of Licensing shall-orders the immediate removal of all children and the closing of the facility.
- C. \_\_\_\_The applicant or licensee has the right to a hearing on the denial or revocation of a license. All administrative hearings for appeals relating to licensing violations

or terms are held in accordance with DCYF Policy 100.0055, Complaints and Hearings (http://sos.ri.gov/rules/).How? Is this a reference to our Complaints and Hearings Policy? If so, need a specific reference and hyper-link.

V. A written request for hearing shall be submitted to the Administrator of Licensing prior to the effective date of the action or within ten (10) days of receipt of the written notice of denial. The hearing will be scheduled in accordance with the Department's policy on Complaints and Hearings.VARIANCE

# H. Variance

- A. The Administrator of Licensinglicensing administrator may allow a variance to a regulation providing that the variance in no way jeopardizes the health, safety or well-being of the children.
  - The licensee shall submits a written request for variance to the Administrator of Licensinglicensing administrator. This request shall contains documentation as to how the licensee plans to meet the intent of the regulation to be varied.
  - 2. The Administrator of Licensing licensing administrator may request additional supporting documentation as deemed necessary.

# B. I-Provisions of the License:

- 1. The license will-states the maximum number of children and the age groups to be served in the centerprogram.
- 1.2. The license-will states the dates of validity.
- <u>II.3.</u> The license shall beis posted in a conspicuous place in the centerprogram.
- HI.4. The license is not transferable—it is, and is granted only to the designated licensee and is limited to the stated location.
- 5. The licensee shall notifiesy the Child Care Licensing Offic Department's Licensing divisione in writing of major changes which affect the license such as:
  - a. \_\_intent to change the name of the centerprogram or the location;
  - intent to change the ownership of the <del>centerprogram, ; change of director or site coordinator;</del>
  - c. change in the physical facility:
  - d. change in the numbers or ages of children served;
  - IV.e. major changes in the program.
- V.6. The license entitles the Director of the Department of Children, Youth and Families or his/her designee and the Child Advocate or his/her designee to be given the right of entrance, the privilege to inspect, and access to all records in order to ascertain compliance with these regulations and to investigate complaints.
- <u>VI.7.</u> When the operation of a\_child-care <u>centerprogram</u> is <u>to be</u>-discontinued, the licensee <u>shall</u>-provides the <u>Department's Licensing division Child</u> <u>Care Licensing Office</u> with\_written notification at least thirty-(30) days prior to the closure.

# I. LEGAL AUTHORITY

CHAPTER 72.1 OF THE GENERAL LAWS OF RHODE ISLAND - LICENSING AND MONITORING OF CHILD CARE PROVIDERS AND CHILD-PLACING AGENCIES

# Section.

- 42-72, 1-1.Statement of purpose.
- 42-72.1-2. Definition of terms.
- 42-72.1-3. Powers and scope of activities.
- 42-72-1-4. License required.
- 42-72.1-5 General licensing provisions.
- 42-72.1-6. Violations, suspensions and revocations of license.
- 42-72.1-7. Penalties for violations.
- 42-72.1-8. Open door policy.
- **42-72.1-1.Statement of purpose.** The director of the department for children and their families, pursuant to 42-72-5(8), shall establish within the department a unit to license and monitor child care providers and child-placing agencies, to protect the health, safety and well-being of children temporarily separated from or being cared for away from their natural families.

Services for children requiring licensure under this chapter shall include all child care providers and child placing agencies which offer services within the state, except as defined in 42-72.1-5 of this chapter.

# 42-72.1-2. Definitions. - As used in this chapter:

- (1) "Administrator of licensing" means the director of licensing unit (or his/her designee) which carries out the provisions of this chapter, hereafter referred to as administrator.
- (2) "Applicant" means a child-placing agency or child care provider that applies for a license to operate.
- (3) "Child" means any person less than eighteen (18) years of age, provided that a child over eighteen (18) years of age who is nevertheless subject to continuing jurisdiction of the family court, pursuant to chapter 1 of title 14 or defined as emotionally disturbed according to chapter 7 of title 40.1, herein shall be considered a child for purposes of this chapter.
- (4) "Child care provider" means a person or agency which offers residential or nonresidential care and/or treatment for a child outside of his/her natural home.
- (5) "Child-placing agency" shall mean any private or public agency which receives children for placement into independent living arrangements, supervised apartment living, residential group care facilities, family foster homes or adoptive homes.
- (6) "Child care" means daily care and/or supervision offered commercially to the public for any part of a twenty-four (24) hour day to children away from their homes.
- (7) "Child care center" means any person, firm, corporation, association or agency who, on a regular or irregular basis, receives any child under the age of sixteen (16) years, for the purpose of care and/or supervision, not in a home or residence, apart from his

- parent or guardian for any part of a twenty-four (24) hour day irrespective of compensation or reward. It shall include child care programs that are offered to employees at the worksite. It does not include nursery schools or other programs of educational services subject to approval by the commissioner of education.
- (8) "Family child care home" means any home other than the child's home in which child day care in lieu of parental care and/or supervision is offered at the same time to four (4) or more children who are not relatives of the care giver.
- (9) "Department" means the Department of Children, Youth and Families (DCYF).
- (10) "Director" means the director of the department for children and their families, or his/her designee.
- (11) "Licensee" means any person, firm, corporations association or agency which holds a valid license under this chapter.
- (12) "Regulation" means any requirement for licensure promulgated pursuant to this chapter having the force of law.
- (13) "Related" means any of the following relationships, by marriage, blood or adoption, even following the death or divorce of a natural parent: parent, grandparent, brother, sister, aunt, uncle, and first cousin. In a prosecution under this chapter or of any law relating thereto, a defendant who relies for a defense upon the relationship of any child to himself, said defendant shall have the burden of proof as to such relationship.
- (14) "Group family child care home" means a residence occupied by a state certified individual and assisted by a minimum of one (1) state approved assistant. The provider must be at least twenty-one years old and must provide care for not less than nine (9) and not more than twelve (12) children for any part of a twenty-four (24) hour day.

# 42-72.1-3. Powers and scope of activities.

- (1) The department shall issue, deny and revoke licenses for, and monitor the operation of, facilities and programs by child placing agencies and child care providers, as defined in [42-72.1-2].
- (2) The department shall adopt, amend, and rescind regulations in accordance with this chapter and implement its provisions. Such regulations shall be promulgated and become effective in accordance with the provisions of the administrative procedures act.
- (3) The department through its licensing unit shall administer and manage the regulations pertaining to the licensing and monitoring of such agencies, and shall exercise all statutory and administrative powers necessary to carry out its functions.
- (4) The administrator shall investigate complaints of noncompliance, and shall take such licensing action as required.
- (5) Regulations formulated pursuant to the foregoing authority shall include, but need not be limited to, the following:
  - (a) financial, administrative and organizational ability, and stability of the applicant;

- (b) compliance with specific fire and safety codes and health regulations;
- (c) character, health suitability, qualifications of child care providers;
- (d) staff/child ratios and workload assignments of staff providing care or supervision to children;
- (e) type and content of records or documents that must be maintained to collect and retain information for planning and caring for children;
- (f) procedures and practices regarding basic child care and placing services to ensure protection to the child regarding the manner and appropriateness of placement;
- (g) service to families of children in care;
- (h) program activities, including components related to physical growth, social, emotional, educational and recreational activities, social services and habilitative or rehabilitative treatment;
- (i) investigation of previous employment, criminal record check and department records check;

# (6) The administrator may:

- (a) prescribe such forms for reports, statements, notices and other documents as are deemed necessary:
- (b) prepare and publish manuals and guides explaining this chapter and the regulations to facilitate compliance with and enforcement of the regulations;
- (c) prepare reports and studies to advance the purpose of this chapter;
- (d) provide consultation and technical assistance, as requested, to assist licensees in maintaining compliance;
- (e) refer to the advisory council for children and families for advice and consultation on licensing matter.

# 42-72.1-4. License required.

- (1) No person shall provide continuing full-time care for a child apart from his parents, or receive or place children in child care services, including child care arrangements, without a license issued pursuant to this chapter. This requirement does not apply to a person related by blood, marriage, guardianship or adoption to the child, unless such arrangement is for purposes of child care.
- (2) The licensing requirement does not apply to shelter operations for parents with children, boarding schools, recreation camps, nursing homes, hospitals, maternity residences and centers for developmentally disabled children.
- (3) No person, no firm, corporation, association, or agency, other than a parent shall

place, offer to place, or assist in the placement of a child in Rhode Island, for the purpose of adoption, unless such person, firm, corporation or agency shall have been licensed for such purposes by the department or is a governmental child-placing agency, and such license shall not have been rescinded at the time of placement of a child for the purpose of adoption. The above does not apply when a person, firm, corporation, association or agency places, offers to place, or assists in the placement of a child in Rhode Island, for the purpose of adoption through a child-placement agency duly licensed for child-placement in the state of Rhode Island or through the department for children and their families, nor when such child is placed with a father, sister, brother, aunt, uncle, grandparent or stepparent of the child.

- (4) No parent shall assign or otherwise transfer to another not related to him/her by blood or marriage, his/her rights or duties with respect to the permanent care and custody of his/her child under eighteen (18) years of age unless duly authorized so to do by an order or decree of court.
- (5) No person shall bring or send into the state any child for the purpose of placing him/her out, or procuring his/her adoptions or placing him/her in a foster home without first obtaining the written consent of the director and such person shall conform to the rules of the director and comply with the provisions of the Interstate Compact on the Placement of Children.
- (6) No person, firm, corporation, association or agency shall operate a familyday\_child care home without a registration license issued by the department.
- (7) No state, county, city or political subdivision shall operate a child placing or child care agency, program or facility without a license issued pursuant to this chapter.
- (8) No person shall be exempt from a required license by reason of public or private, sectarian, nonsectarian, court operated child placement of child-care program, for profit or nonprofit status, or by any other reason of funding, sponsorship or affiliation.

# **42-72.1-5.** General licensing provisions. The following general licensing provisions shall apply:

- (1) A license issued under this chapter is not transferable and applies only to the licensee and the location stated in the application and remains the property of the department. A license shall be publicly displayed. A license shall be valid for one (1) year from the date of issue and upon continuing compliance with the regulations, except that a certificate issued to a family day care home shall be valid for two (2) years from date of issue.
- (2) A licensee shall comply with applicable state fire and health safety standards.
- (3) The department may grant a provisional license to an applicant who is not able to demonstrate compliance with all of the regulations because the program or residence is not in full operation; however, said applicant must meet all regulations that can be met in the opinion of the administrator before the program is fully operational. The provisional license shall be granted for a limited period not to

exceed six (6) months and shall be subject to review every three (3) months.

- (4) The department may grant a probationary license to a licensee who is temporarily unable to comply with a rule or rules when the noncompliance does not present an immediate threat to the health and well-being of the children, and when the licensee has obtained a plan approved by the administrator to correct the areas of noncompliance within the probationary period. A probationary license shall be issued for up to twelve (12) months; it may be extended for an additional six (6) months at the discretion of the administrator. A probationary license that states the conditions of probation may be issued by the administrator at any time for due cause. Any prior existing license is invalidated when a probationary license is issued. When the probationary license expires the administrator may reinstate the original license to the end of its term, issue a new license or revoke the license.
- (5) The administrator will establish criteria and procedure for granting variances as part of the regulations.
- (6) The above exceptions (probationary and provisional licensing and variances) do not apply to and shall not be deemed to constitute any variance from state fire and health safety standards.

# 42-72.1-6. Violations, Suspensions and Revocations of license.

- (1) When a licensee violates the terms of the license, the provisions of this chapter or any regulation thereunder, the department may pursue the administrative remedies herein provided, in addition to other civil or criminal remedies according to the general laws.
- (2) After notice and hearing, as provided by the administrative procedures act, the administrator may revoke the license, or suspend the license for a period not exceeding six (6) months.
- (3) During a suspension the agency, facility or program shall cease operation.
- (4) To end a suspension, the licensee shall, within thirty (30) days of the notice of suspension submit a plan of corrective action to the administrator. Such plan shall outline the steps and timetables for immediate correction of the areas of noncompliance and is subject to approval of the administrator.
- (5) At the end of the suspension, the administrator may reinstate the license for the term of the original license, revoke the license, issue a new license, or deny a reapplication.
- (6) Upon revocation, the licensed agency, program or facility shall cease operation. The licensee whose license has been revoked may not apply for a similar license within a three (3) year period from the date of revocation.

# 42-72.1-7. Penalties for violations.

(1) Any person who violates any of the provisions of this chapter, or any regulations issued pursuant to this chapter, or who shall intentionally make any false statement or reports to the director with reference to the matters contained herein, shall, upon conviction for the first offense, be imprisoned for a term not exceeding six (6)

months or be fined not exceeding five hundred dollars (\$500), or both and for a second or subsequent offense, shall be imprisoned for a term not exceeding one (1) year or be fined not exceeding one thousand dollars (\$1000) or both such fine and imprisonment.

- (2) Anyone who maintains or conducts such a program, agency or facility without first having obtained a license as herein provided, or who maintains or conducts such a program, agency or facility after a license has been revoked or suspended or who shall refuse to permit a reasonable inspection and examination of such program, agency or facility, as herein provided, shall be guilty of a misdemeaner and, upon conviction, shall be fined not more than five hundred dollars (\$500) for each week that such program, agency or facility shall have been maintained without a license or for each refusal to permit inspection and examination by the director.
- (3) Any individual firm, corporation or other entity who maintains or conducts a family day care home without first having obtained a registration certificate for the home as provided herein, shall be guilty of a misdemeanor and, upon conviction, shall be fined not less than twenty-five dollars (\$25) nor more than one hundred dollars (\$100) for each week that such home shall have been maintained without a valid registration certificate.
- (4) The department shall refer any such violations to the attorney general's office for prosecution.
- **42-72.1-8. Open door policy. -** There shall be an open door policy permitting any custodial parent or legal guardian to have access to a child care facility for any program when their child is in attendance.

# CHAPTER 23-28.15 OF THE GENERAL LAWS OF RHODE ISLAND - CHILD CARE CENTERSSection.

23-28.15-21. Release of children to proper persons. - Every operator or employee of a child care center, prior to releasing physical custody of any child to any person, shall first insure that the person to whom physical custody is released is a proper person for such custody.

A proper person for such custody shall be a person whose name has been furnished and updated annually to the child care center by a parent or legal guardian of such child, and whose identity can be verified by a proper identification card bearing his or her photograph.

# VI. PROCEDURE FOR APPEAL/HEARING

- A. Any applicant for licensure or license holder may appeal any action or decision of a Departmental staff person, supervisor or administrator that is adverse to the person's status as an applicant or license holder.
- B. A written request for hearing is submitted to the licensing administrator prior to the effective date of the action or within ten days of receipt of the written notice of denial.
- C. All administrative appeals/hearings relating to licensing actions or decisions are held in accordance with DCYF Policy 100.0055, Complaints and Hearings (http://sos.ri.gov/rules/).

# SECTION THREE - LICENSING STANDARDS

# I. PHYSICAL SPACE AND HOME SAFETY

# **II. REGULATIONS FOR LICENSURE** ONE: ENROLLMENT AND STAFFING GOAL: The program admits children who are age-appropriate. It is sufficiently staffed to provide individual attention to the children enrolled and to promote their physical, social, emotional, and cognitive development. AGE FOR ADMISSION: The minimum age for admission shall be six (6) weeks for centers operating programs for infants. An infant is defined as being between six (6) weeks and eighteen (18) months of age. No center shall admit children under the age of six (6) weeks in an infant program. The minimum age for admission shall be eighteen (18) months for centers operating programs for toddlers. A toddler is defined as being between eighteen months and three years of age. No center shall admit children under eighteen (18) months in a toddler program. The minimum age for admission shall be three (3) years for centers operating preschool programs. No center shall admit children under three (3) years in a preschool program. AGE INTEGRATION: Centers operating any combination of child care programs where age integration takes place, shall meet the more stringent regulations for licensure. Centers operating both preschool and infant and/or toddler components, where there is no age integration of children as delineated above, shall not place an exceptional child above or below stipulated age requirements unless written exception is granted by the licensing agency. A developmental assessment of the child may be required for such placement. Centers operating preschool programs and school age programs shall comply as follows: a. The preschool regulations shall apply where there is age integration of both groups of children. b. The school age regulations shall apply when the program is operating either in a

AGE	<del>STAFF  </del>	
	CHILD	GROUP
	RATIO	SIZE
6 weeks to	1 to 4	<del>8</del>
18 months		
— 18 months	———— 1 to 6	<del>12</del>
to 3 years		

following staff to child ratios and maximum group requirements:

separate facility or in a separate location in the same building where no age

STAFF/CHILD RATIO AND MAXIMUM GROUP SIZE: Centers shall maintain the

integration between the two programs takes place.

4 years     1 to 10     20       5 years     1 to 12     24	3 years	——— 1 to 9	<del>18</del>
——————————————————————————————————————	4 years	——— 1 to 10	<del>20</del>
	——————————————————————————————————————	1 to 12	<del>24</del>

Exception: there will be no exception to the above requirements for infants (6 weeks to 18 months); exception may only be made to the above requirements for nap time, however, staff must remain on site of the facility.

### Additional considerations:

- a. Maximum group size is determined by the number of children cared for by a caregiver or group of caregivers in a classroom or designated area.
- b. Group dividers are used and are physical barriers that completely separate groups of children. Groups may be combined for special activities such as outdoor play, meals, sleeping, or field trips
- c. Staff/child ratios are increased to 1 to 4 for swimming and other potentially dangerous activities.
- d. When staff members are functioning in administrative supervisory or support services roles, they shall not count in the staff/child ratio.
- e. Programs serving mixed age groupings shall meet the staff/child ratio and group size requirements for the younger age grouping.
- f. Programs that provide for inclusive settings for children with disabilities and developmental delays may have staff adult/child ratios that are better than those required above for each classroom. The staff adult/child ratios used shall be determined by the program in consideration of the IEPs or IFSPs for students and/or other special learning, health or social and emotional needs of the children in each classroom. If the child has an IEP or IFSP, the program will work with the school district to support the child's IEP/IFSP.

NIGHT-TIME CARE: Under no circumstances is a child in care for over 24 consecutive hours.

- a. All staff members required to meet staff-child ratios is awake at all times.
- b. A staff person remains with each group of children at all times.
- c. Emergency lighting devices are installed throughout centers that provide night care.
  - Sleeping accommodations are restricted to ground floor areas.
  - e. Arrangements are made for personal hygiene, including bathing and tooth brushing.
- f. Privacy is ensured for children while they are washing and when they are changing clothes.

SUPERVISION:\_Children shall be under the direct supervision of child care staff at all times. All aspects of the program, including toileting, resting or sleeping, eating, and outdoor play, shall be supervised by designated staff. This includes staff being in the room at all times and able to see and hear the children they are responsible for.

STAFFING PATTERNS: The grid below represents potential staffing patterns. Programs can choose any option within a category that meets the size of their programs. Individuals need to meet the credential requirements below to serve in these positions, which are listed in the staff qualifications section of these regulations.

One	——— Two to Four	——————————————————————————————————————
<del>Classroom</del>	<del>Classrooms</del>	<del>classrooms</del>
Administrator	Administrator	
<del>(part time)</del>	<del>(part time)</del>	<del>r (full time)</del>

———Ed.		Ed.	————Ed.
Coord	<del>inator</del>	Coordinator	Coordinato
<del>(part t</del>	<del>ime)</del>	<del>(part time)</del>	(full time)
N N	<del>ier (full</del> —	Teachers	Teachers
time)		Teacher	Teacher
———Teach	or.	Assistants	Assistants
	ant (full	710010101110	Assistants
time)			
Admir	nistrator/ —	Administrator/	Administrat
Ed.	<del>libti attiir</del>	Ed.	r (part time
Coord	ingtor	Coordinator	***
<del>Coord</del> (part t		(part time in	+ Administrat
each i	,	<del>each role)</del>	e Assistant
	<del>ier (full</del> —	Teachers	<del>(part time)</del>
<del>time)</del>	_	Teacher	——— <u>Ed.</u>
Teach	-	<del>Assistants</del>	Coordinato
	ant (full		(full time)
<del>time)</del>			Teachers
			——— Teacher
			Assistants
Admir	<del>nistrator</del> —	Administrator	Administrat
<del>(part t</del>	<del>ime)</del>	<del>(part time)</del>	<del>r/Ed.</del>
——— <del>Ed.</del>		Ed.	Coordinato
Coord	<del>inator/T</del>	Coordinator/T	<del>(part time i</del>
eache	<del>r (full</del>	eacher (part	each role)
time)	·	time in each	Teachers
——— Teach	<del>ier</del>	<del>role)</del>	Teacher
Assist	<del>ant (full</del> —	Teachers	Assistants
time)		Teacher	
,		Assistants	
Admir	nistrator/ —	Administrator/	
Ed.		Teacher (part	
	inator/T	time in each	
eache		role)	
time)	i (idii	Fd.	
Teach	ıor	Coordinator	
	ant (full	(part time)	
time)	<del>ant (tull</del>	<del>(part time)</del> Teachers	
<del>ume)</del>			
		Teacher Assistants	
		<del>Assistants</del>	

- FULL-TIME STAFF:_Full-time staff shall be defined as working in the program for
no less than 30 hours per week for centers which operate full-day programs.
GROUP STAFFING: Each contar shall have one staff member at the level of
teacher for each group of children. These staff shall work under the supervision
of the education coordinator.
-
STAFF PERSON IN CHARGE: In the absence of the administrator and the
and the other control of the control of

STAFF PERSON IN CHARGE: In the absence of the administrator and the education coordinator, there shall be a staff person designated to be in charge. This person shall be knowledgeable in the overall functioning of the center and shall maintain responsibility for staff supervision during the times that they are in charge.

NURSE: Centers serving infants under the age of 18 months shall have a nurse on the premises a minimum of three hours per day at a time when most of the children are received for care. The nurse shall:

On a self-control to a discrete and a control to a stiff of the control of the discrete and a self-control of the control of t
a. Coordinate the depth and scope of health services provided;
b. Participate in the enrollment decision-making process in collaboration
with other appropriate staff members;
c. Provide on-site supervision and monitoring of the health status of all
infants enrolled in the center;
d. Maintain responsibility for the health records of the children enrolled in
the center; Serve as a health consultant to staff and families and be the primary
liaison to health consultants and services outside the center:
e. The nurse may also function in an additional staff capacity after the
duties and responsibilities of the nurse's role have been discharged or
participation in the public health model of Child Care Health Consultant.
CONSULTATIVE MEDICAL SERVICES: Centers serving children over 18
months of age shall have readily available the consultant services of a licensed
physician or registered nurse. The center shall have access to such professional
services at all times when children are in care. There shall be a letter of
understanding to document the availability of these services.
AUXILIARY STAFF: Provision shall be made to carry out the necessary clerical,
housekeeping, kitchen and maintenance functions needed to insure the smooth
running of the center. Child-caring staff members may perform these functions
but shall not be counted in the staff/child ratio while doing so.
FOOD CEDVICE WORKED: Contain whose carelles art accorde 00 shildren
FOOD SERVICE WORKER: Centers whose enrollment exceeds 20 children
shall employ at least one part-time or full-time food service worker if the center
prepares and serves meals.
VOLUNTEERS: Volunteers shall not be counted as staff when scheduling to
meet staff/child ratios.
a. Volunteers must be 18 years of age or older.
·
b.All volunteers shall be cleared and approved.
c.All volunteers shall be given a formal orientation to center policies and procedures, and
the volunteer assignment.
d.All volunteer must always work under the supervision of program staff and never be left
alone with children or engage in any disciplinary action with a child.
a. Volunteers shall be allowed to be counted in the staff/child ratio when scheduled staff
are absent due to illness or emergency provided that the volunteer has fulfilled all
staff requirements.
If teen volunteers or interns are engaged, they must be closely monitored at all times by
an adult supervisor.
If teen volunteers or interns are engaged, the following additional standards
<del>apply:</del>
Teen volunteers must be 16 years of age.
Teen volunteers must be closely monitored by an adult who is physically present in
monitoring at all times.
Programs must keep the following documentation on file:
Have a signed consent agreement from a parent or guardian stating that they approve of
this volunteer assignment, and have reviewed with their child assuring the teen
must never be alone with a child/group of children or engage in any disciplinary
action with a child.
Have copies of the child's emergency contact information
Have a copy of the child's signed school physical form
STAFFING PLAN: The program shall have a staffing plan and schedule for each
classroom including a list of qualified substitutes

STAFF COVERAGE: There shall be two or more staff members on site at all times.

SUBSTITUTES: There shall be a list of substitutes who can be called upon in the event of the absence of a staff member in order to maintain the required staff-child ratio. Substitutes shall meet staff requirements. Long term substitutes shall meet the staff qualifications for the assigned position. Long term substitutes are needed when a person is out for 20 or more consecutive days.

# A. Physical Ffacilities

 GOAL: The indoor and outdoor facilities foster the children's growth and development through a variety of opportunities for safe exploration and learning.

# Prior to licensing,

\_\_1. INSPECTIONS: The physical facilities shall be in compliance with local zoning ordinances and with the applicable sections of the State Building, Fire, Health and Sanitation Codes. Prior to licensing, the water in the facility shall be tested and shown to be below maximum acceptable standards for lead in drinking water.

# physical facilities:

- a. comply with building, fire, health and sanitation codes;
- b. provide evidence that the facility and water source are lead free or lead safe; providing
- c. provide evidence that the facility is asbestos-free or asbestos safe;
- d. have an acceptable score on a radon test within the last three years; and;
- e. can accommodate children and adults with disabilities in accordance with disabilities requirements including the American with Disabilities Act (ADA).
- 2. REVIEW OF PLANS: Plans for the erection of new buildings or playgrounds or for the renovation or modification of existing buildings or playgrounds shall be are submitted to the Department for review prior to the start of construction.
- 4. The program's exterior doors are must be locked.
  - The program's designated main entrance(s) have a doorbell,
     buzzer, keypad, swipe card or other comparable means for entrance.
  - b. Unlocked doors are monitored at all times by a staff person.
- 5. Stairways used by children have a second railing placed at the appropriate height for the children's use.

# B. 3. Location of Cehild Ceare Rrooms:

- Center Program rooms for infants and/or toddlers shall beare located on the first floor, ground level where there is direct access to the outside without the use of stairs.
- CenterProgram rooms for preschool children, ages three 3 to five years, shall beare permitted on the first or second floor.
- All facilities, which include classrooms, bathrooms, gross motor spaces and libraries, used by the children, shall be conveniently are located on the same floor level as the activity rooms or classrooms.
- <u>4.</u> <u>FNo facilities used by the children shall beare not located below ground level.</u>

- 5. Center facilities licensed prior to the effective date of these regulations shall remain eligible for licensing for the designated age level as long as at the licensee of record continues to operate the center. If a classroom for preschoolers is located on the second floor, the evacuation plan must be appropriate for children of that age and developmental ability.
- \_\_\_\_\_Stairways: Stairways used by children shall have a second railing placed at the appropriate height for the children's use.

# C. Ventilation and Lighting:

- 1. <u>T</u>There <u>shall beis</u> adequate ventilation and artificial lighting throughout the <u>centerprogram</u> facility.
- 2. \_\_-All activity rooms used for children-shall have provision for natural lighting through a window or a skylight directly to the outdoors.
- 3. \_\_\_-Exterior doors and windows, which are opened for ventilation, shall are be-securely screened.
- 4. The temperature in rooms used by children shall beis maintained within a range of 65 74 degrees F° at the level of the children's height and the heat shall beis kept constant.
- 5. Rooms where infants are cared for shall beare maintained at a minimum of 68 degrees F° at crib height.
- 6. There shall beis a minimum of 300 cubic feet of air space for each child.
  - \_\_\_\_\_\_
- 7. and pPortable space heaters are prohibited.

# D. Square Ffootage:

- There shall beis a minimum of 45 square feet of usable floor space for each child in activity rooms or classrooms used for infant and/or toddler care.
- 2. There shall beis a minimum of 35 square feet of usable floor space for each child in activity rooms or classrooms used for the care of preschool children, ages 3-three to five5 years.

# E. Classroom/Activity Room

- Classrooms are separate areas with floor to ceiling walls.
- If floor to ceiling walls are not possible, then classrooms areas may be partitioned off with stable walls of at least four feet in height that completely separate groups of children.

# F. Infant and Ttoddler Sspace:

- Children under the age of 3-three years shall-have rooms or areas
  physically separate from those used by children 3-three years and over.
- 2. Transition rooms or areas shall beare permitted for children who are between 33 thirty-three months and 39 thirty-nine months of age.

#### G. Areas:

- Indoor activity shall be clearly defined by spatial arrangement.
- Space shall beis subdivided into areas and be is arranged to provide clear pathways for movement from one area to another, to separate noisy activities from quieter ones, and to provide for visual supervision by staff.
- 3. Furniture shall be splaced to ensure safety and ease of supervision.

# H. Storage <u>\$S</u>pace:

- There shall be sadequate space for the storage of individual clothing with hooks at children's level for the use of toddlers and preschool children.
- There shall beis adequate storage space for equipment, including cots and blankets, materials, supplies, and seasonal toys.

# Isolation Aarea:

- There shall beis an isolation area equipped with a cot to accommodate a child who becomes ill.
- This area shall beis located near a lavatory and be is visible for staff supervision.
- 3. A -sick child is isolated a minimum of three feet away from the other children.

TOILET FACILITIES: Centers serving children under the age of 2 years shall have one toilet and one sink for each group of 20 children. Centers serving children 2 years and older shall have one toilet and one sink of each group of 10 children. Hand washing sinks shall have both warm and cold water running water. Potty chairs shall not take the place of the required toilets. There shall be a diaper hanging area and an adjacent adult hand washing sink with warm and cold running water for each group of 20 children under the age of 3 years. Diaper changing areas and adult hand washing sinks shall be separate and apart from any food preparation area. There shall be separate toilet facilities for staff.

DRINKING WATER: There shall be drinking water readily available to the children while they are in care. Drinking cups shall be single-use and disposable. The source of drinking water shall be separate from the lavatory.

FOOD PREPARATION AREA: There shall be an appropriately equipped kitchen for food preparation when meals are prepared at the center. When meals are not prepared at the center, there shall be a appropriately equipped food permeation area to be used exclusively for food handling and distribution, including the preparation of snacks. The kitchen or food preparation area shall be sanitary, well lighted, and orderly, with adequate refrigeration for perishables, appropriate safeguards for the storage and handling of supplies and means for sterilizing dishes or providing disposables.

- <u>Utility room:</u> There shall be a utility room, separate from the kitchen, with hot and cold water and storage space for cleaning equipment and supplies.
- K. Space is provided for administrative and clerical functions.

CLEANLINESS: All parts of the center and its premises shall be kept in good repair, clean, neat, and free of hazards. Maintenance of the facility shall be done when children are not present.

# Outdoor play area:

- L. Outdoor play area:
  - is appropriately equipped for gross motor activity.
  - 2. has at least 75 square feet of space per child for at least 50% of the capacity of the program.
  - is easily accessible with a plan for how the outdoor space is utilized to support quality programming and ensure safety.
  - 4. is properly fenced with fencing of at least four feet in height, reasonably level, well-drained, and free from hazards.

- 5. climbing equipment, swings and large pieces of play equipment are developmentally appropriate for the ages of children, are securely anchored and maintained in good repair.
- 6. outdoor equipment, including but not limited to swings, slides and climbing apparatus, are:
  - a. age and developmentally appropriate.
  - b. installed, maintained and used in accordance with manufacturers' specifications and instructions.
  - approved by the US Consumer Product Safety Commission, and
     maintained in good repair.
- 7. cushioning materials such as mats, wood chips or sand are used under climbers, slides, revolving equipment or swings.
- 8. organic cushioning is at least six inches in depth, if used.
- There shall be an appropriately equipped outdoor play area for gross motor activity. The outdoor play area
- 9. shall have at least 75 square feet of space \_andi. It shall bei\_safe, properly fenced with fencing of at least four (4) feet in height, reasonably level, well-drained, and free from hazards. Climbing equipment, swings, and large pieces of play equipment shall be \_areanchored and maintained in good repair. \_; all equipment is Cushioning materials such as mats, wood chips, or sand shall be used under climbers, slides, or swings. If organic cushioning (i.e. \_,or e.g. sand, wood chips, etc.) is used, it shall be of at least 6" in depth. The outdoor play area for infants and/or toddlers shall beis separate from that used by older children.

# M. Toilet Ffacilities:

- CenterPrograms serving children under the age of thirty-six months 2
  years shall-have one toilet and one sink for each group of 20-twenty
  children.
- CenterPrograms serving children three 2-years and older shall have one toilet and one sink for each group of 10 ten children.
- 3. Hand washing sinks shall have both warm and cold running water set to appropriate hand washing temperatures.
- 4. Water temperature is at least 60 degrees F° and does not exceed 120 degrees F°.
- There shall beis a diaper changing area and an adjacent adult hand washing sink with warm and cold running water for each group of twenty children under the age of three years.
- <u>6.</u> Diaper changing areas and adult hand washing sinks <u>shall beare</u> separate and apart from any food preparation area.
- 7. There shall be are separate toilet facilities in the same building for staff.

# N. Drinking Wwater:

- 1. There shall be drinking water readily available to children while they are in care. Drinking water is available and is easily accessible both indoors and outdoors to children throughout the day, including at all meals.
- 2. Drinking water supplies are located in or near classrooms and playrooms.
- 3. Drinking cups shall be are single-use and disposable.
- 4. The source of drinking water shall be separate from the lavatory.
- 5. Water fountains are not permitted in the childcare facility, unless disposable single-use cups are used.

# O. Food Ppreparation Aarea:

 There shall beis an appropriately equipped kitchen for food preparation when meals are prepared at the centerprogram.

- When meals are not prepared at the <u>centerprogram</u>, there <u>shall beis</u> an <u>appropriately</u> equipped food preparation area to be used exclusively for food handling and distribution, including the preparation of snacks.
- 3. The kitchen or food preparation area shall beis sanitary, well lighted it, and orderly, with adequate refrigeration for perishables temperatures of 41 F° or lower for refrigerator and 0 F° or lower for freezer.
- 4. There is appropriate safeguards for the sufficient storage and appropriate handling of supplies, and means for sterilizing dishes or provideing disposable s.

# P. Cleanliness:

- All parts of the <u>centerprogram</u> and its premises <u>shall beare</u> kept in good repair, clean, neat, and free of hazards.
- 2. Products used for cleaning, sanitizing, and disinfecting are US

  Eenvironmental Perotection Aagency registered and are used in accordance with the manufacturers' instructions.
- 3. Maintenance of the facility shall beis done when children are not present.
- 4. If program uses bleach for sanitizing surfaces and toys, bleach dilutions comply with California Environmental Protection Agency, Department of Pesticide Regulation, Sanitize Safely and Effectively: Bleach and Alternatives in Child Care Programs http://www.ucsfchildcarehealth.org/pdfs/healthandsafety/SanitizeSafely En0709.pdf.
- For additional guidance on safely preparing bleach solutions, visit:
- http://www.ucsfchildcarchealth.org/pdfs/healthandsafety/ipm\_sanatizing\_e n1110.pdf - not clear - is this a requirement or suggestion?
- 5. The following methods for achieving the control of rodent and insect infestation are used, including:
  - a. thorough sanitation and proper screening;
  - b. use of insecticides and rodenticides in accordance with instructions on the label;
  - c. structure blocking of avenues through which insects and rodents could gain access to the building; and
  - d. insecticides and rodenticides used are approved by the Rhode Island Department of Health.
- 6. All equipment and materials are clean and sanitary and checked regularly to ensure freedom from hazards.

# Q. Telephone:

- There shall beis a telephone, other than a pay phone, conveniently located within the centerprogram facility.
- 2. The telephone shall be kept in working order functional and shall be readily available for use in case of an emergency.
- 3. Emergency phone numbers, including 911, local fire and police departments, emergency treatment facility, consulting physician or nurse, and poison <u>centerprogram</u> <u>shall beare</u> posted in a conspicuous place, adjacent to the phone.
- 4. Staff do not use personal cell phones while supervising children.

OFFICE SPACE: There shall be space provided for administrative and clerical functions.

SHARED USE OF PREMISES: It is preferable that the premises not be shared by other groups when the program is not in operation. However, with sufficient safeguards for cleanliness, protection of equipment, and general sanitation, dual occupancy may be permitted. A formal request for approval for shared use of the premises shall be appended to the application.

# R. Furniture

- There is sufficient quantity of furniture in the program to accommodate the number of children enrolled.
- 2. Is safe, durable, child-sized and easily cleaned.
- 3. Conforms to all applicable safety regulations.
- 4. Seating is provided for every child.

# S. Cots and Cribs

- 1. A cot is provided for each preschool child.
- 2. A cot or a full sized crib is provided for each toddler.
- 3. Cots are not used for children under twelve months of age.
- 4. A crib is provided and used for each infant in care.
- There is one crib equipped with wheels for every five children under two years.
- 5. This crib is used for evacuation in the event of an emergency.
- 6. Cribs and cots are washed and sanitized before reassignment to another child.
- 7. There are at least two feet of space between each cot and/or crib during nap/ rest time.
- Program maintains proof onsite that each crib used in the facility meets
   the Consumer Product Safety Commission Standards for full-size baby
   cribs and non-full-size baby cribs.
- 9. <u>of compliancePack in plays, playpens and other portable cribs are not permitted.</u>
- T. Audio-visual equipment, when utilized, is appropriate for the age and developmental level of the children enrolled.

# U. Infant Equipment

- 1. The infant area contains comfortable seating for staff, including at least one rocking chair.
- 2. The program insures that an adequate supply of clean diapers, bed linens and clothing changes are available.
- 3. The program has a choke prevention gauge which is used to determine if an object is large enough so as not to be swallowed by a child.
- 4. The use of walkers is prohibited.
- 5. Baby corrals and playards are prohibited.

# V. Shared Use of Premises

- 1. It is preferable that the premises not be shared by other groups when the program is not in operation. However, with sufficient safeguards for cleanliness, protection of equipment, and general sanitation, dual occupancy may be permitted.
- 2. A formal request for approval for shared use of the premises is appended to the application.

# II. HEALTH AND NUTRITION

TWO: STAFF QUALIFICATIONS AND ONGOING PROFESSIONAL DEVELOPMENT REQUIREMENTS

<ul> <li>GOAL: The program is staffed by adults who understand child</li> </ul>	
development and who recognize and provide for the children's needs.	
ADMINISTRATOR: Each program shall have an administrator who shall be responsible for its overall operation in compliance with these	
regulations.	
This role may be assumed by, but not necessarily limited to, the child	
care center director, executive director, education manager or program director who meets the following criteria:	
Qualifications	
Option One: Full-time Education Coordinator	
The administrator in a center where there is a full-time education	
coordinator shall have experience in administration and/or business management.	
Option Two: Part-time Education Coordinator	
The administrator in a center where there is a part-time education coordinator shall have:	
*experience in administration and/or business management;	
*successfully completed at least 18 credits in Early Childhood Education and/or	
Child Development at the post-secondary level; AND	
- a minimum of three years of experience working in a licensed/approved early	
childhood program.	
Ongoing Professional Development	
20 hours of professional development each year aligned to the Workford	9
Knowledge and Competencies relevant to this position	
EDUCATION COORDINATOR: Each program shall have a person	
assigned to the role of Education Coordinator. This person shall be responsible for:	
*the development and implementation of the early learning and development program, including classroom curriculum;	
*the organization of children's groups; and	
*staff performance.	
This role may be assumed by, but not necessarily be limited to, the	
program director, education manager, teacher or consultant who meets	
the following criteria:	
——————————————————————————————————————	
— Option One	
Hold a current Rhode Island Department of Education Teacher	
Certification for grades PreK to 2.	
——————————————————————————————————————	
Hold a Bachelor's or Master's degree in a related field such as Child	
Dovolopment Flomentary Education or Special Education with 24 gradity	

	Early Childhood Education from an accredited or approved institution of her education.
<del>Ор</del>	tion 3
	ld a current Rhode Island Department of Education Teacher
	rtification for Early Childhood Special Education, which includes Early
Ch	ildhood Certification.
Ex	<del>perience</del>
	ninimum of three months supervised teaching experience in a
	ensed/approved early childhood program for the appropriate age level
<del>(st</del> ı	udent teaching may fulfill this requirement).
On	going Professional Development
	hours of professional development each year aligned to the Workforce
	owledge and Competences relevant to this position.
Te:	acher: Each group of children shall have an individual who works unde
	supervision and guidance of the Education Coordinator to care for the
	ldren and implement the classroom curriculum, and who, at a
	nimum, meets the following criteria:
 —Qu	alifications
—— Ор	t <del>ion One</del>
	gh school diploma with a vocational concentration in child care that
	Judes two (2) years of supervised experience in an licensed/approved
	rly childhood program;
On	tion Two
	gh school diploma or its equivalent; AND
	ee (3) years of supervised experience in a licensed/approved early
	Idhood program or certified family day care home; AND
	istory of regular participation in an ongoing early childhood staff
	velopment program.
On	geing Professional Development
	hours of professional development each year aligned to the Workforce
	owledge and Competences relevant to this position.
——Tea	acher Assistant: Each group of children shall have an individual who is
res	ponsible for assisting the teacher in the care and early learning of
	Idren and meets the following criteria:
Qu	alifications
	eacher aide shall be at least 18 years old; and have a GED or high
	nool diploma and participate in an ongoing early childhood staff
	velopment program.
On	geing Professional Development

 20 hours of professional development each year aligned to the Workforce
Knowledge and Competencies relevant to this position.
 <u>—</u>
 ADMINISTRATIVE ASSISTANT: The administrative assistant shall assist
the administrator in the overall operations in compliance with these
regulations.
——————————————————————————————————————
Must have experience in administration or have professional preparation
 in a field appropriate for those who work with young children.
 —
 Ongoing Professional Development
 20 hours of professional development each year aligned to the Workforce
Knowledge and Competencies relevant to this position.
 <u> </u>
 NURSE QUALIFICATIONS: The nurse shall possess appropriate
education and training to work with infants and their families and shall be
currently licensed by the state as a registered nurse or a licensed
practical nurse. The nurse must participate in 20 hours of professional
development each year.
—— AUXILIARY STAFF QUALIFICATIONS: The qualifications of other staff
 employed to carry out clerical, housekeeping; kitchen or maintenance
functions shall be consistent with the skills needed to perform the
respective job. Kitchen staff must participate in 8 hours of training each
year.
 <del></del>
 CONSULTANTS: When the center employs or uses the services of other
professional staff such as physicians, psychiatrists, social caseworkers,
psychologists, or nurses, these persons shall meet the minimum
professional standards in their particular field. Professional persons
whose practice is regulated by state law shall meet the requirements
mandated by the State of Rhode Island in their respective fields.
 ODIENTATION: The center shall provide a formal orientation for all now.
ORIENTATION: The center shall provide a formal orientation for all new staff and volunteers. A signed and dated description of the information
covered in the orientation shall be kept on file in the center for review by
the Department representative during monitoring visits.
 —
 PROFESSIONAL DEVELOPMENT: All child-caring staff, including the
administrator and education coordinator, shall complete a minimum of
twenty hours per year of training and aligned with the Workforce
Knowledge and Competencies aligned to their individual role.
 The Education Coordinator in conjunction with the Administrator shall be
responsible for developing and overseeing an individualized training plan
for each staff person.
 Training shall be in areas relevant to the care of young children and shall
be directed towards transferable skills rather than center specific
knowledge

Training may consist of workshops/seminars conducted by recognized professionals in the field; professional conferences; courses at an approved or accredited institution of higher education; or other similar professional activities such as classroom observation, reading relevant books and articles, etc. EMPLOYMENT BACKGROUND CRIMINAL RECORD AND CHILD ABUSE AND NEGLECT TRACKING SYSTEM (CPS) CHECKS: The center director shall be responsible for insuring that employment background checks, criminal record checks, and CPS checks are conducted on all new staff prior to the assignment of child care duties, including consultants, whether full or part-time, who: i. Have supervisory or disciplinary power over children; or ii. Have routine contact with children without the presence of other staff. EMPLOYMENT BACKGROUND CHECK: The employment background check shall consist of the following: i.Completion of an Employment History Affidavit by the applicant, identifying places of employment, addresses, dates, and supervisors for the past thirty-six months. Employment shall include part-time, full-time, and/or volunteer. ii. Verification by the center of employment information for the past twelve months. Verification may be by telephone or in writing. Verification shall include the name, address, and title of the person verifying and an assessment of the reliability, performance, and character of the applicant. iii. The affidavit and verification shall be completed and placed in the personnel file prior to the applicant beginning the job assignment. CRIMINAL RECORD CHECK: The criminal record check shall consist of the following: i.Completion of a Criminal Record Affidavit by the applicant. ii. The taking of the applicant's fingerprints by the bureau of criminal identification of the state or local police. iii. Comparison of the applicant's fingerprints with those on file through the national criminal identification computer operated by the Federal Bureau of Investigation (FBI). iv. Notification by the bureau of criminal identification that the applicant does or does not have disqualifying information (see Appendix). v.lf the applicant has undergone a criminal records check in accordance with these regulations in the eighteen (18) months prior to the date of application, a letter from the police verifying the date and results of that check shall be acceptable. vi. The affidavit shall be completed and fingerprints taken prior to the applicant beginning the job assignment. The affidavit and documentation of fingerprinting shall be placed in the employee's personnel file. vii. Within ninety (90) calendar days of hiring, notice shall be placed in the personnel file identifying the results of the criminal records check. If notice is not received within ninety (90) days, the applicant shall be relieved of child caring responsibilities. **DISQUALIFYING INFORMATION: If notification is received that** disqualifying information has been found, the center administrator shall

immediately notify the employee in writing that his/her employment will be

terminated in ten (10) working days. A copy of this letter shall go to the		
Department of Children, Youth and Families Administrative Hearing		
Officer. This letter shall inform the employee of the right to appeal.		
CPS CHECK: The CPS check shall consist of the following:		
i.Completion of a request for DCYF Clearance by the applicant.		
ii.Forwarding of the DCYF Clearance form to the Department for screening		
against the CPS_computer file.		
RESULTS OF CPS CHECK: The Department shall notify the center and		
the applicant in writing of the results of the CPS check.		
The applicant shall be cleared when:		
i.There are no CPS findings;		
ii.The applicant is identified as a non-involved adult in a CPS_investigation;		
iii.The CPS record identifies the applicant as the perpetrator in an investigation		
but the finding is classified as an Early Warning or Unfounded.		
iv. The applicant shall not be disqualified from employment when he/ she is		
identified as the perpetrator in an indicated CPS investigation not listed		
on the CPS Check Addendum Disqualifying Information (see Appendix).		
v.The applicant shall be disqualified from employment when he/she is identified		
as the perpetrator in an indicated CPS investigation listed on the CPS		
Check Addendum - Disqualifying Information.		
<del></del>		
CPS INVESTIGATION - INDICATED PERPETRATOR: The center		
administrator shall immediately relieve an employee from child caring		
duties when notice is received from the Department that the employee is		
identified as a perpetrator in an indicated CPS investigation listed on the		
CPS Check Addendum - Disqualifying Information.		
or o onook riddondam Bioqualitying information.		
APPEAL OF DISQUALIFICATION - CRIMINAL RECORD CHECKS OR		
CPS CHECK:		
a. Within five (5) working days of receipt of written notification of		
disqualifying information, the applicant or employee shall put the		
Department and the center administrator on notice as to the intent to		
appeal by filing a Request for Hearing. The applicant shall attach a copy		
of his/her report of disqualifying information which identifies the specific		
disqualifying information. A copy of this material shall also be sent to the		
center director.		
b. Within ten (10) working days of submitting the Request For		
Hearing, the applicant shall provide written references attesting to		
excellence in child care sufficient to warrant disregard of the otherwise		
disqualifying information. Such references shall be from individuals who		
are qualified by virtue of education and/or experience to testify as to the		
abilities of the applicant. Such individuals include:		
i.Licensed child care providers.		
ii.Current or previous child care professionals.		
iii.Other professionals with credentials which would enable them to effectively		
judge the applicant's qualifications in providing child care.		
c. The Administrative Hearing Officer shall review the materials		
submitted and rule on the appeal within seventy-two (72) hours of receipt		
of all materials. If the applicant has not demonstrated a record of		
excellence in child care sufficient to warrant disregard of the otherwise		
disqualifying information, the Administrative Hearing Officer shall uphold		

the denial and notify the applicant of the reason for the decision. The center shall only be notified that the applicant has not demonstrated a record of excellence sufficient to warrant disregard of the disqualifying information.

If the applicant has demonstrated a record of excellence in child care sufficient to warrant disregard of the otherwise disqualifying information, the Administrative Hearing Officer shall overturn the disqualification and shall notify the applicant and the center in writing.

TWO: HEALTH, SAFETY AND NUTRITION HEALTH, SAFETY AND NUTRITION

GOAL: The operation of the center reflects a concern for the health, safety, and nutrition of the children, protects them from abuse and neglect, and serves to educate staff, children, and families in matters concerning health, safety, and nutrition practices.

TUBERCULIN TEST: Prior to employment, each full or part-time employee and those persons (such as food handlers, bus drivers, volunteers, etc.) whose duties bring them into direct contact with children shall file with the director of the day care program a report from a licensed physician that such person is free of tuberculosis based on a physical examination and a negative Mantoux (PPD) tuberculin skin test by current standards performed not more then six (6) months before the report is filed.

If the Mantoux test is positive or a previous one is known to have been positive, the physician's certification that the tuberculosis is not communicable shall be based on documentation of adequate chemotherapy for tuberculosis or on a chest x-ray taken not more than six (6) months prior to the certification.

Employees who have a negative Mantoux test at the time of employment and are free of symptoms suggestive of tuberculosis need not have further testing.

- A. RUBELLA: At the time of initial employment, all female employees of child bearing age (up to 35-thirty-five years of age) shall bemust required to have a rubella (German measles) susceptibility blood test; or show proof of immunity by previous testing; or produce a record of having received rubella vaccine.
- B. Immunization Records: Each child upon first entering a day care center shall furnish the administrative head of the center with one of the following:
  - 1. Childcare workers must be up to date what is the authority on vaccines including measles-mumps-rubella [MMR], tetanus-diphtheria-pertussis [Tdap], varicella, influenza, and hepatitis B.
  - 2. Each child upon first entry to any child care program or preschool provides evidence to the administrative head of the program that the student has been immunized, as required in the Rules and Regulations Pertaining to Immunization and Testing for Communicable Diseases, Rhode Island Department of Health http://sos.ri.gov/documents/archives/regdocs/released/pdf/DOH/5526.pdf what agency promulgates these?
    - a. eEvidence that such child has been immunized, or is being immunized according to schedule against diphtheria, pertussis, tetanus, polio, measles, haemophilus influenza B. rubella, and mumps, or has had the natural disease; or

- er an Immunization Exemption Form from a licensed physician stating that such child is not a fit subject for immunization for medical reasons; or
- c. <a href="mailto:or-a">or-a</a> certificate signed by the parent or guardian stating that immunizations are contrary to his/her beliefs. <a href="mailto:said-F">(Said-F">form is available through the Office of Disease Control at the Department of Health</a>).
- d. No child may enter a child carechildcare centerprogram unless evidence is submitted that the child has received initial doses of required vaccines.
- e. The <u>centerprogram shall beis</u> responsible for maintaining a current record of immunization for the child who is not fully immunized, documenting when immunizations take place, and following up with the parent to insure that the child is being immunized according to schedule.
- f. Acceptable evidence of immunization consists of:
  - i. aA written statement signed by a licensed physician; or
     ii. an official immunization record card, school immunization record, Medical Passport, World Health
    - immunization record, Medical Passport, World Healtl Organization immunization record: —or
  - iii. other official immunization record acceptable to the Office of Disease Control of the Rhode Island .l.1.
    Department of Health; or
  - electronically stored and/or transmitted documentary record (facsimile transmission, computerized records, records on magnetic media or similar record) as may be utilized by a <a href="mailto:center-program">center-program</a>/school; or

telephone confirmation of the existence of immunization records as defined above provided all of the following conditions are met:

acceptable documentary record is on file with the center/school the child attended previously, or on file with a health care provider, public health agency, other health professional or center/school official responsible for maintenance of immunization records;

such telephone confirmation is obtained by an official of the center in which the child enrolls,
telephone confirmation is sought and obtained within one

working day of the child's initial enrollment; and within one working day of the child's initial enrollment; and written documentation is made in the child's health record of the telephone call, the name, address, and telephone number of the person who confirmed the immunization status, and the written documentary record is received by the center in which the child has enrolled within ten (10) working days of initial

the child has enrolled within ten (10) working days of initial enrollment.

- The immunization record chall-must contain the day, month, and year of each dose of vaccine administered.

  When a child transfers to another centerorgram or school, the
- <u>p.h.</u> When a child transfers to another <u>centerprogram</u> or school, the child's immunization record <u>shall beis</u> released to the authorized <u>centerprogram</u> or school official.

# C. Health eexamination:

Evidence of a preadmission health examination and subsequent yearly health examination shall beis presented, which includesing information regarding whatever information the reporting physician deems

appropriate, and reporting the presence of any condition or handicap affecting the child's general health.

If development concerns are found, referrals shall be made as specified in the Regulations of the Board of Resents Governing the Special Education of Handicapped Children for children age 3 years and older or in the Early Intervention Regulations for infants/toddlers (birth to 3 years).

- <u>2.</u> Each <u>centerprogram</u> <u>shall</u>-require-<u>s</u> additional health examinations or information yearly in order to maintain current information and assure the full participation of each child in the <u>centerprogram-program</u>.
- D. A lead screening test (FeP) is done annually, or as recommended by the Rhode <u>Island Department of Health</u>, for each child between the ages of nine months and six years.
- E. Daily Health Assessment
  - 1. The program conducts a daily health assessment of each child.
  - 2. A child who gives any evidence of suspicious symptoms is excluded, waiting in a room apart and attended by an adult until the parent can come for the child.
  - 3. Each child's record contains a statement signed by the parents authorizing the program to act in an emergency.

Preadmission <u>lintakes: A conference including parents, staff and other appropriate specialist shall precede the admission of a child with a handicapping condition to determine the extent to which the child's needs can adequately be met by the center.</u>

- For and infant or toddler referred by early intervention for an integrated group placement, a preadmission conference, involving the appropriate day care staff, the family and the early intervention professionals shall take place and shall include discussion of the health status of the child, any specialized procedures which may be necessary to support the child's developmental progress and the specific training/consultation resources to be provided to the day care program by the specialized personnel and/or family.
  - Preadmission intakes are scheduled to secure health and family history, to obtain background information on the child and his/her home, and to develop the child's program.
  - 2. Areas of discussion could include, but are not be limited to:
    - a. Child's strengths and needs
    - b. Families goals for a child
    - c. Family history and background
    - d. Necessary supports and accommodations to ensure the child's health, safety, and early learning and development
    - e. Copy of Program policies and procedures as part of preadmission forms.

**LEAD SCREENING:** A lead screening test (FeP) shall be done annually, or as recommended by the Rhode Island Department of Health, for each child between the ages of nine months and six years.

- G. Communicable Ddisease:
  - 1. Child or staff member suffering from a reportable communicable disease follow specific timelines of absence prior to returning to the program in

accordance with Attendance of a child or staff member while suffering from a reportable communicable disease shall be under the direction of the Rhode Island Department of Health, Division of Disease Prevention and Control, Office Of Communicable Disease Guidelines For Communicable Disease Prevention And Control, http://www.health.ri.gov/publications/guides/CommunicableDiseasePreventionAndControl.pdf-

2. In the event a child or staff member suffers from a communicable disease, the program provides written notice to inform parent what communicable disease the child may have been exposed to, without providing any identifying information.

- DAILY HEALTH ASSESSMENT: There shall be a daily health assessment of each child. A child who gives any evidence of suspicious symptoms shall be excluded, waiting in a room apart and attended by an adult until the parent can come for the child. There shall be a statement signed by the parents in each child's record authorizing the center to act in an emergency.
- Exclusion and readmission: In all matters of exclusion and readmission of children for reasons of illness, the decision of the centerprogram director, in consultation with a licensed physician, shall applyapplies.

# H. Child Aabuse and Neglect Reporting:

- 1. Any suspected case of child abuse and/or neglect shall beis reported to the Department of Children, Youth and Families CPS hotline (1-800-RI-CHILD) within 24-twenty-four hours (1-800-RICHILD) in accordance with state law and DCYF Policy 500.0000: Reporting Child Abuse and/or Neglect (http://sos.ri.gov/rules/), including any death or serious injury while in care of the program.-
- 2. The centerprogram shall also reports to the Child Care Licensing Office Department's licensing unit immediately after reporting to CPS (1-800-RI-CHILD). the CPS hotline.

#### I. Corporal Punishment and Restraint

- 1. Staff do not physically restrain children.
- 2. Staff do not restrain a child in a high chair for reasons other than feeding/eating.—We do not put examples in policy.
- 3. Staff do not hit, grab, push, or pull the children or engage in any form of corporal punishment.
- 4. Children are not subjected to cruel or severe punishment, humiliation, physical punishment, threats or verbal abuse, including yelling or derogatory remarks.
- 5. Children are not ignored or neglected.
- 6. Children are not deprived of meal, snacks, physical activity or outdoor play as a reward or behavior consequence. Exceptions may only be made if specifically statesd in a child's Individualized Education Program (IEP) or Individual Family Service Plan (IFSP).
- 7. Children are not punished for soiling, wetting, or not using the toilet.

# J. First Aaid:

- 1. First aid equipment for the less serious problems, e.g. common cuts, splinters or, brush burn, shall beare available.
- 2. All staff members shall have knowledge of general first aid procedures.

- 3. At least one staff member 50% of all staff members involved in direct care who are trained in cardiopulmonary resuscitation (CPR) and who have completed the Red Cross basic first aid course or the equivalent shall beare in attendance in the centerprogram at all times.
- 4. Choke-saving poster: Each centerprogram shall havehas a choke-saving poster outlining the Heimlich Maneuver, which is . The choke-saving poster shall be prominently displayed in the area where the children eat.
- <u>CenterProgram</u>s serving infants and toddlers <u>shall</u> have at least one staff member trained in the use of the Heimlich Maneuver with this age group available in the <u>centerprogram</u> at all times.

# K. Injury Rreport:

- 1. Parent must sign aA written report shall be made to and signed by the parent on the day that an injury occurs.
- 2. A copy of this report shall beis placed in the child's record.
- The injury, first aid and parent communication shall be recorded in the center program's health log.

#### L. Administration of Mmedication:

- Each <u>centerprogram</u> <u>shall</u> establish<u>es</u> guidelines for the administration of medications.
- If a centerprogram chooses to administer medication, the following procedures shall apply:
  - a. Neither prescribed nor non-prescribed medications shall beare administered to a child without written parental authorization.
  - b. Medication is not administered to a child without a written order from a licensed physician (which may include the label on the medication) indicating that the medicine is for a specified child and is in the original container.
  - a.c. \_-These written instructionsorder shall-includes the name of the medication, circumstances under which it may be administered, dosage, and frequency of administration. What written instructions?
    - b. Prescription shall not be administered to a child without written order of a licensed physician (which may include the label on the medication) which indicates that the medicine is for a specified child and is in the original container.
  - d. \_\_e. All medications shall beare administered by the centerprogram director or his/her designee.
  - e. d. The centerprogram shall maintains, on a daily basis, a written record of every medication administered. This record shall includes:
    - i. the child's name;
    - ii. the name and dosage of medication administered;
    - iii. the date and time administered:
    - iv. the name and signature of the person who administered the medication; and
    - the name of the licensed physician prescribing the medication.
  - e. In the event of an emergency, the daily log shall beis transported with the child to the emergency treatment facility.
  - g. f. Medications shall beare stored in clearly labeled original containers, out of reach of children.

- h. g. Parents shall be Program advises parents d that medications should to administer medications be given at home whenever possible.
- M. Storage of items of potential danger: All medical supplies, poisonous or toxic substances, and items of potential danger to children including but not limited to (cleaning supplies and equipment, paints, plastic bags and, aerosols, etc.) shall beare clearly labeled, locked and stored out of reach of children.

FIRE DRILLS: The administrator or his/her designee shall conduct at least one fire drill per month that they are in operation. Both obstructed and unobstructed drills shall be conducted. A record of such drills shall be maintained. Centers with night care shall conduct fire drills during their hours of operation in the evening.

EVACUATION PLAN: A graphic evacuation plan, identifying alternative escape routes, shall be posted in each classroom. This plan shall be in accordance with the State Fire Code.

The center shall have a written fire evacuation plan which includes specific provisions for the evacuation of infants, toddlers, and children and staff with special needs. This plan shall be reviewed and approved annually by the state or local fire inspector.

SMOKING: Smoking shall not be permitted in the center facility.

#### HAND WASHING:

a. Staff shall wash their hands with liquid soap and warm running water as needed, and:

after each diaper change;

after each toileting;

after wiping a runny nose;

before any food preparation or service.

b. Staff shall ensure that children wash their hands with liquid soap and warm running water as needed, and:

after each toileting;

before each meal or snack;

after wiping or blowing their nose;

Sinks used for food preparation or clean up shall not be used for hand washing after toileting or diaper changing.

- c. Sinks used for food preparation or clean up shall not be used for hand washing after toileting or diaper changing.
  - N. Children with Special Health Care Needs

- If there are children in the program who have special health care needs, specific health procedures are delivered, where appropriate, by a licensed/certified health professional or a staff person who has been trained to appropriately carry out such procedures.
- 2. Such procedures may include, but are not be limited to: Epi Pen, nebulizer, and insulin injections, etc.
- 3. Cln addition; children with special needs are provided opportunities for active play while other children are physically active.

# O. Children with Food Allergies or Special Nutrition Needs

- 1. For each child with special health care needs, food allergies or special nutrition needs, the program requests the family to obtain from the child's health provider an individualized care plan that is prepared in consultation with family members and specialists involved in the child's care
- 2. The program protects children with food allergies from contact with the problem food.
- 3. The program asks families of a child with food allergies to give consent for publicly posting information about that child's food allergy.
  - a. If consent is given, that information is posted in the food preparation area and in the areas of the program the child uses so it is a visual reminder to all those who interact with the child during the program day.
  - b. If consent for posting is not provided, then this information is shared with all relevant staff, including substitutes, to ensure that they are informed.

# P. Health and Safety Training

- The program ensures that specific training is provided to staff to be able
  to appropriately address health and safety of children with developmental
  delays and disabilities, special health and special nutrition needs;
  including medical needs.
- 2. Nutrition education is offered to childcare providers at least one time per year.
- 3. Physical activity education is offered to childcare providers at least one time per year.

# Q. Fire Drills and Evacuation Plans

- 1. The administrator or his/her designee conducts at least one fire drill per month that the program is are in operation.
- Both obstructed and unobstructed drills are conducted and a record of such drills isare maintained.
- Programs with night care conduct fire drills during their hours of operation at night. Is this different from night?
- 4. Individualized evacuation plans for children with developmental delays and disabilities are in place when appropriate.
- 5. A graphic evacuation plan, identifying alternative escape routes, is posted in each classroom and is in compliance with state fire code.—Does this mean complies with?
- 6. The program has a written fire evacuation plan, which includes specific provisions for the evacuation of infants, toddlers, and children and staff with special needs.
- 7. This plan is reviewed and approved annually by the state or local fire inspector.

#### R. Cleaning and Sanitizing Routines

- Staff wash their hands with liquid soap and warm running water as needed, and:
  - a. after each diaper change;
  - after each toileting;
  - c. after wiping a runny nose; and
  - d. before any food preparation or service.
- 2. Staff ensure that children wash their hands with liquid soap and warm running water as needed, and:
  - a. after each toileting;
  - b. before each meal or snack;
  - c. after wiping or blowing their nose; and
  - d. after outdoor activities or returning from playground.
- 3. Sinks used for food preparation or clean up are not used for hand washing after toileting or diaper changing.
- 4. The program uses appropriate bleach solution or other U.S.

  Environmental Protection Agency approved products for the routine cleaning and sanitizing of all surfaces, which are consistent with the recommendations of Caring for Our Children: National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care, A Joint Collaborative Project of the American Academy of Pediatrics, American Public Health Association and National Resource Program for Health and Safety in Child Care.
- 5. The program posts and follows a cleaning and sanitation schedule consistent with the recommendations of Caring for Our Children:

  National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care, A Joint Collaborative Project of the American Academy of Pediatrics, American Public Health Association and National Resource Program for Health and Safety in Child Care.

# S. Meals and Senacks

- 1. :The <u>centerprogram</u> <u>shall</u>-provide<u>s</u> breakfast or a mid\_morning snack and a mid-afternoon snack.
- a. Meals shall beare served at the centerprogram at suitable intervals.
- 3. Children shall be are provided with a nutritionally balanced lunch.
- Bln addition, breakfast and/or dinner shall beis provided for children who are in care for more than nine (9) hours.
- \_\_\_\_\_If lunches or other meals are provided by the parent, the center shall have written nutrition guidelines which shall be given to parents at the time of enrollment.
- \_\_\_\_\_The center staff shall monitor meals to insure nutritional value.
- There shall be a supply of food available in the center to provide nutritional meals to children whose parents do not provide food and to supplement any foods brought by children which are not nutritional or of sufficient quantity.
- 5. Each meal includes one-third of the total daily nutritional requirements of what authority?recommended by the USDA.
- 6. Meals and snacks meet current Child and Adult Care Food Program
  (http://www.fns.usda.gov/child-nutrition-programs) nutritional standards
  for all applicable children. Snacks include fruits, vegetables and milk.
- 7. High fat, high sugar, and high salt foods are served less than one time per week or are not served at all.
- 8. Additional servings:
  - a. are available when a child remains hungry;
  - b. This doesn't fit this list.meet nutritional standards; and
  - are not required to be the same food as the first serving.

- On special occasions, such as parties, food and drink that does not meet nutritional requirements may be served in addition to required meals and snacks.
- 10. If the parent provides lunches or other meals, the program has written nutrition guidelines that are given to parents at the time of enrollment.
  - a. The program staff monitors meals to ensure nutritional value.
  - <u>All meals brought to the program meet current Child and Adult</u>
     Food Care Program nutritional standards.
- 11. There is a supply of food available in the program to provide nutritional meals to children whose parents do not provide food and to supplement any foods brought by children, which is not nutritional or of sufficient quantity.
- 12. Written menus for meals and/or snacks are planned on a five week rotating basis and are posted weekly where parents can see them.
- 13. At least one childcare provider sits with children at the table and eats the same meals and snacks.
- 14. Children are not forced to eat and food is not used as a reward.

#### T. Drinks

- 1. Safe drinking water is available to children both indoors and outdoors at all times and is offered at intervals that are responsive to the needs of the individual children.
- 2. Children are encouraged to drink water throughout the day, especially before, during, and after outdoor play.
- Children one year of age are served whole milk when not served breast milk or formula.
- 4. Children two years of age and older are served skim or one percent milk.
- 5. If served, only 100% fruit juice is used.
  - a. Infants are not served fruit juice.
  - b. Juice is limited to a total of six ounces or less per day for children over one year of age.
- 6. Program does not serve or allow drinks sweetened artificially or with sugar, including soda and flavored milk.
- 7. Program does not serve or allow caffeinated drinks, including soda and energy drinks.

MENUS: Written menus for meals and/or snacks shall be planned on a five week rotating basis and shall be posted weekly where parents can see them.

# U. Infant/Toddler Feeding

- A feeding plan is established for each infant and toddler prior to admission.
- The plan is developed in consultation with the parent, and based on the recommendation of the child's health care provider and.
- 1. This plan is reviewed at least every six months.
- 2. Individual feeding plans are followed except for toddlers who are mature enough to eat on a schedule.
- 3. INFANT/TODDLER FEEDING: The infant/toddler feeding program shall foster appropriate learning and pleasurable experiences. Staff feed infants on demand, responding to the cues they provide when hungry and full to allow infants to control the pace and amounts of their intake. How do 3 and 4 relate to the plan in 1 and 2?
- 4. Infants who are unable to sit in feeding chairs shall beare held while being fed.
- <u>a.5.</u> <u>No bottles Bottles</u> <u>shall beare not</u> propped at any time and <u>no children</u> <u>shall ever beare not</u> fed in a crib.

- <u>b.6.</u> Children who are not ready for self-feeding <u>shall beare</u> fed by an individual staff member on a one-to-one basis.
- <u>e.7.</u> Self-feeding <u>shall beis</u> encouraged <u>\_and \_aAppropriate</u> finger foods <u>shall beare</u> provided. \_A clean, sanitized training <u>cup cup shall beis</u> provided for each child ready to begin drinking from a cup.
- <u>d.8.</u> Solid foods <u>shall beare</u> introduced to infants and toddlers in accordance with the physician's recommendation or as specified by the parent.
- <u>e.9.</u> Single use cloths or towelettes <u>shall beare</u> used for washing children's faces and hands before and after eating and as necessary.
- e.A heating unit for warming bottles and food shall beis readily accessible to staff.-If a microwave oven is used for heating, specific heating instructions shall be posted on the oven. These instructions shall include the following:

b.All bottles shall be heated uncovered c.All food shall be stirred before serving

- d.10. All bottles shall be shaken before the fluid temperature is checked
- 11. Microwaves are not used for heating bottles.
- 12. Only BPA free plastic or glass bottles are used.
- 13. INFANT DAILY LOG: For each child under eighteen months of age, a daily log shall beis maintained to record information on eating, drinking, changing, napping and behavior. This log shall beis made available for review by the parent. provided in writing to the parent.
- 14. FORMULA: The centerprogram shall-serves breast milk commercial formula that is mixed and served according to manufacturer's instructions or breast milk that is prepared by the parent or commercial formula that is mixed and served according to manufacturer's instructions.
  - <u>a.</u> Every effort is made to accommodate the needs of a child who is being breast-fed.
  - <u>b.</u> All breast milk or formula <u>shall beis</u> clearly labeled with the child's name and date of preparation, <u>if applicable.</u>
  - c. -Bottles provided by parents are labeled with dates and child's name.
  - d. Heating breast milk and formula and other food items for infants in a microwave oven is prohibited.
- 15. Prepared formula or breast milk is used immediately or stored in the refrigerator at 40 degrees F<sup>o</sup> or below. Prepared fSuch formula or breast milk shall beis discarded at the end of the day.
  - a. Any formula or breast milk remaining in a <u>bottle</u>nurser after feeding <u>shall beis</u> discarded.
  - b. If permanent wear bottles and reusable nipples are provided by the <u>centerprogram</u> for community use, they <u>shall beare</u> washed and sanitized in a dishwasher where the water temperature is at least 180 degrees F or boiled for at least <u>five 5</u>-minutes.
- <u>16.</u> <u>COMMERCIAL BABY FOOD:</u> If commercial baby food is provided by the parent, it <u>shall beis</u> in the unopened original container. \_Any food remaining in the container after feeding <u>shall beis</u> discarded.

#### V. Diapering:

- 1. Children shall beare changed and diapered regularly and shall beare washed and dried with sanitary, single use cloths or towelettes.
- a.2. The diaper changing surface ischall be cleaned and sanitized with a disposable towel and disinfectant solution prepared daily (such as 1/2 cup of bleach mixed with 1 gallon of water or appropriate mixture as stated in "Caring for our Children"), preferably in a spray bottle after each use. Not U.S. EPA

- <u>b.3.</u> Staff shall-wash their hands thoroughly with liquid soap and warm running water after each diaper change. It is recommended that staff use disposable latex gloves for diaper changing. Talthough the use of latex/plastic gloves does not eliminate the need for hand washing.
- 4. Staff shall-use conveniently located, washable, plastic bag lined, covered receptacles for soiled diapers.
  - <u>a.</u> These containers <u>shall beare</u> emptied as often as necessary to eliminate odors.
  - <u>b.</u> <u>They shall be Containers are</u> cleaned and disinfected daily.
    - The soiled diapers shall beare removed from the building daily.
- 5. If cloth diapers are used, a toilet shall be designated for rinsing the diapers. the diapers are not rinsed or dumped at the childcare facility.
  - a. Soiled cloth diapers are completely wrapped in a non-permeable material, stored in a location inaccessible to children and given directly to the parent/guardian upon discharge of the child.
  - <u>d.b.</u> The soiled diapers <u>shall beare</u> placed in a covered container away from the children's activity and food service areas and <u>shall beare</u> removed from the facility daily.
- e.lf a tub or plastic basin is used for bathing children, it shall be cleaned and sanitized after each use.
- 6. No child shall beis left unattended during diapering.

# W. \_Toilet Ttraining:

- Toilet training shall beis an individual plan, based on the child's readiness and carried out in conjunction with the parent.
- There shall beare no routine attempts to toilet train children under the age of 24-twenty-four months.
- 3. POTTY CHAIRS: Potty chairs used for toilet training shall be promptly cleaned and sanitized after each use. No child shall be left unattended while using a potty chair. Potty chairs are not permitted in program facilities.

#### X. Bucket Seats and High Chairs

- 1. Bucket seats and high chairs are only used for feeding, and are not used during activity time or as a form of restraint.
- 2. Children are not seated for periods longer than fifteen minutes except when eating.

#### Y.\_\_\_Pets

- 1. All pets maintained on the premises shall beare kept in a safe and sanitary manner and according to state and local requirements.
- Children shall beare protected from pets which pets that are potentially dangerous to their health or safety.
- 3. Parents are notified of any pets on the premises.

#### Z. Rest Arrangements for Infants

- All staff, parents/guardians, volunteers and others who care for infants in the child care setting follow these required safe sleep practices as recommended by the American Academy of Pediatrics (AAP). Is that 2 and 3? Or all?
- 2. Infants up to twelve months of age are placed on their back while sleeping unless the infant's primary care provider has completed a signed waiver indicating that the child requires an alternate sleeping arrangement. Words missing?

- Infants are placed for sleep in safe sleep environments which included a
  firm crib mattress covered by a tight fitting sheet in a safety approved
  crib.
- 4. Cribs must meet the standards and guidelines reviewed/approved by the US Consumer Product Safety Commission (CPSC) and ASTM international ASTM.
- 5. Monitors or positioning devices are not used unless required by the child's primary care provider.
- 6. No items are placed in a crib occupied by an infant except for a pacifier.

#### AA. Prohibited Practices

- Smoking and the use of tobacco products is not permitted in the buildings or outdoor play areas, or on grounds within 25 feet of buildings.
- 2. Smoking in any vehicle used by the program for transporting children is prohibited.
- 3. No illegal drugs or alcohol is used or permitted in the program facility.
- 4. No guns or weapons of any kind are permitted in the program facility.

# **BB.** Physical Activity

- 1. Each childcare program provides a program of age and developmentally appropriate physical activity.
- 2. Children ages twelve months or older attending a full-day program participate in at least sixty minutes of physical activity per day.
- 3. Children attending less than a full day program participate in a proportionate amount of physically active play.

#### CC. Screen Time

- 1. Screen time is defined as looking at electronic media with a screen, including watching screens while others use the media.
- 2. TPrograms that use television or other screen time, the following applies:
  - a. is prohibited for children under two;
  - b. prohibited during meal and snack times. However, snacks may
     be provided during occasional group activities;
  - c. prohibited for groups when all children in group are birth through twenty-three months of age;
  - d. <u>limited for all other groups whether teaching personnel-directed</u> or a child-selected activity;
  - e. is limited to thirty minutes or less per day for each child or group;
  - f. is limited to one hour or less per evening for each child or group in evening or overnight care.
- 3. Exceptions to limited time include:
  - a. electronic media used for children's homework;
  - b. e-readers for reading;
  - smart boards and tables if used for hands-on learning activities, such as drawing or puzzles;
  - d. electronic media involving physical activity participation; and
  - e. occasional group activities, such as watching a movie, provided alternate supervised activities remain available to children.

# **THREE: HEALTH, SAFETY AND NUTRITION**

**GOAL**: The operation of the center reflects a concern for the health, safety, and nutrition of the children, protects them from abuse and neglect, and serves to educate staff, children, and families in matters concerning health, safety, and nutrition practices.

**RUBELLA**: At the time of initial employment, all female employees of child bearing age (up to 35 years of age) shall be required to have a rubella (German measles) susceptibility blood test; or show proof of immunity by previous testing; or produce a record of having received rubella vaccine.

#### **IMMUNIZATION RECORDS:**

**Employees:** Childcare workers should be up to date on vaccines including measles-mumps-rubella [MMR], tetanus-diphtheria-pertussis [Tdap], varicella, influenza, and hepatitis B

Children: Each child upon first entry to any child care center or preschool in this state shall furnish evidence to the administrative head of the child care center or preschool that the student has been immunized, as required in the Rules and Regulations Pertaining to Immunization and Testing for Communicable Diseases:

a. Evidence that such child has been immunized, or is being immunized according to schedule against diphtheria, pertussis, tetanus, polio, measles, haemophilus influenza B. rubella, and mumps, or has had natural disease;

b.or an Immunization Exemption Form from a licensed physician stating that such child is not a fit subject for immunization for medical reasons;

c.or a certificate signed by the parent or guardian stating that immunizations are contrary to his/her beliefs. (Said form is available through the Office of Disease Control at the Department of Health).

d.No child may enter a child care center unless evidence is submitted that the child has received initial doses of required vaccines.

e.The center shall be responsible for maintaining a current record of immunization for the child who is not fully immunized, documenting when immunizations take place, and following up with the parent to insure that the child is being immunized according to schedule.

f.Acceptable evidence of immunization consists of:

i.A written statement signed by a licensed physician; or

ii.an official immunization record card, school immunization record, Medical Passport, World Health Organization immunization record, or

iii. other official immunization record acceptable to the Office of Disease Control of the R.1. Department of Health;or

iv. electronically stored and/or transmitted documentary record (facsimile transmission, computerized records, records on magnetic media or similar record)

as may be utilized by a center/school; or

g. The immunization record shall contain the day, month, and year of each dose of vaccine administered.

h.When a child transfers to another center or school, the child's immunization record shall be released to the authorized center or school official.

**HEALTH EXAMINATION**: Evidence of a preadmission health examination and subsequent yearly health examination shall be presented, including whatever information the reporting physician deems appropriate, and reporting the presence of any condition or handicap affecting the child's general health.

Each center shall require additional health examinations or information yearly in order to maintain current information and assure the full participation of each child in the center program.

**LEAD SCREENING:** A lead screening test (FeP) shall be done annually, or as recommended by the Rhode Island Department of Health, for each child between the ages of nine months and six years.

**DAILY HEALTH ASSESSMENT:** There shall be a daily health assessment of each child. A child who gives any evidence of suspicious symptoms shall be excluded, waiting in a room apart and attended by an adult until the parent can come for the child. There shall be a statement signed by the parents in each child's record authorizing the center to act in an emergency.

**PREADMISSION INTAKES:** Preadmission intakes shall be scheduled to secure health and family history, to obtain background information on the child and his/her home, and to develop the child's program. Areas of discussion could include, but not be limited to:

- □Child's strengths and needs
- □Families goals for a child
- **□Family history and background**
- □Necessary supports and accommodations to ensure the child's health, safety, and early learning and development
- □Copy of Center policies and procedures as part of preadmission forms

**COMMUNICABLE DISEASE**: Attendance of a child or staff member while suffering from a reportable communicable disease shall be under the direction of the Rhode Island Department of Health, Division of Disease Control. All parents shall be notified of communicable diseases in writing and they shall be posted publicly onsite.

**EXCLUSION AND READMISSION:** In all matters of exclusion and readmission of children for reasons of illness, the decision of the center director, in consultation with a licensed physician, shall apply.

<u>CHILD ABUSE AND NEGLECT REPORTING</u>: Any suspected case of child abuse and/or neglect shall be reported to the Department of Children, Youth and Families within 24 hours (1-800-RICHILD) in accordance with state law, including any death or serious injury while in care of the center.

The center shall also report to the Child Care Licensing Office immediately after reporting to CPS (1-800-RI-CHILD).

# **CORPORAL PUNISHMENT:**

a.Staff shall not physically restrain children. (For example, restraining a child in a high chair for reasons other than feeding/eating.)

b.Staff shall not hit, <u>grab</u>, <u>push</u>, <u>or pull</u> the children or engage in any form of corporal punishment.

c.Children shall not be subjected to cruel or severe punishment, humiliation, physical punishment, threats or verbal abuse, including yelling, screaming or derogatory remarks.

d.Children shall not be ignored or neglected.

e.Children shall not be deprived of meal, snacks, physical activity or outdoor play as a reward or behavior consequence. Exceptions may only be made if specifically states in a child's Individualized Education Program (IEP)orIndividual Family Service Plan (IFSP).

f.Children shall not be punished for soiling, wetting, or not using the toilet.

**FIRST AID:** First aid equipment for the less serious problems, e.g. common cuts, splinters, brush burn, shall be available.

All staff members shall have knowledge of general first aid procedures. At least 50% of all staff members involved in direct care who are trained in cardiopulmonary resuscitation (CPR) and who have completed the Red Cross basic first aid course or the equivalent shall be in attendancein the center at all times.

CHOKE-SAVING POSTER: Each center shall have a choke-saving poster outlining the Heimlich Maneuver. The choke-saving poster shall be prominently displayed in the area where the children eat.

Centers serving infants and toddlers shall have at least one staff member trained in the use of the Heimlich Maneuver with this age group available in the center at all times.

**INJURY REPORT**: A written report shall be made to and signed by the parent on the day that an injury occurs. A copy of this report shall be placed in the child's record. The injury, first aid and parent communication shall be recorded in the center health log.

**ADMINISTRATION OF MEDICATION:** Each center shall establish guidelines for the administration of medications. If a center chooses to administer medication, the following procedures shall apply:

- a.Neither prescribed nor\_non-prescribed medications shall be administered to a child without written parental authorization. These written instructions shall include the name of the medication, circumstances under which it may be administered, dosage, and frequency of administration.
- b. Any\_medication shall not be administered to a child without written order of a licensed physician (which may include the label on the medication) which indicates that the medicine is for a specified child and is in the original container.
- c. All medications shall be administered by the center director or his/her designee.
- d. The center shall maintain, on a daily basis, a written record of every medication administered. This record shall include:

i.the child's name:

ii.the name and dosage of medication administered;

iii.the date and time administered:

iv.the name and signature of the person who administered the medication:

v.the name of the licensed physician prescribing the medication.

- e. In the event of an emergency, the daily log shall be transported with the child to the emergency treatment facility.
- f. Medications shall be stored in clearly labeled original containers, out of reach of children.
- g. Parents shall be advised that medications should be given at home whenever possible.

STORAGE OF ITEMS OF POTENTIAL DANGER: All medical supplies, poisonous or toxic substances, and items of potential danger to children (cleaning supplies and equipment, paints, plastic bags, aerosols, etc.) shall be clearly labeled, locked and stored out of reach of children.

CHILDREN WITH SPECIAL HEALTH CARE NEEDS: If there are children in the program who have special health care needs, specific health procedures shall be delivered, where appropriate, by a licensed/certified health professional or a staff person who has been trained to appropriately carry out such procedures. Such procedures may include, but not be limited to, Epi Pen, nebulizer, insulin injections, etc.In addition; children with special needs shall be provided opportunities for active play while other children are physically active.

CHILDREN WITH FOOD ALLERGIES OR SPECIAL NUTRITION NEEDS: For each child with special health care needs, food allergies or special nutrition needs, the program shall request the family to obtain from the child's health provider an individualized care plan that is prepared in consultation with family members and specialists involved in the child's care. The program shall protect children with food allergies from contact with the problem food. The program shall ask families of a child with food allergies to give consent for publicly posting information about that child's food allergy. If consent is given, then it shall post that information in the food

preparation area and in the areas of the program the child uses so it is a visual reminder to all those who interact with the child during the program day. If consent for posting is not provided, then this information shall be shared with all relevant staff, including substitutes, to ensure that they are informed.

HEALTH AND SAFETY TRAINING: The program shall ensure that specific training is provided to staff to be able to appropriately address health and safety of children with developmental delays and disabilities, special health and special nutrition needs; including medical needs. Nutrition education shall be offered to child care providers at least one time per year. Physical activity education shall be offered to child care providers at least one time per year

FIRE DRILLS: The administrator or his/her designee shall conduct at least one fire drill per month that they are in operation. Both obstructed and unobstructed drills shall be conducted. A record of such drills shall be maintained. Centers with night care shall conduct fire drills during their hours of operation in the evening.

CHILDREN'S EVACUATION PLANS: individualized evacuation plans for children with developmental delays and disabilities shall be in place when appropriate.

**EVACUATION PLAN**: A graphic evacuation plan, identifying alternative escape routes, shall be posted in each classroom. This plan shall be in accordance with the State Fire Code.

The center shall have a written fire evacuation plan which includes specific provisions for the evacuation of infants, toddlers, and children and staff with special needs. This plan shall be reviewed and approved annually by the state or local fire inspector.

#### HAND WASHING:

a. Staff shall wash their hands with liquid soap and warm running water as needed, and:

i.after each diaper change;

ii.after each toileting:

iii.after wiping a runny nose;

iv.before any food preparation or service.

b. Staff shall ensure that children wash their hands with liquid soap and warm running water as needed, and:

i.after each toileting;

ii.before each meal or snack;

iii.after wiping or blowing their nose;

iv.after outdoor activities or returning from playground.

c. Sinks used for food preparation or clean up shall not be used for hand washing after toileting or diaper changing.

CLEANING AND SANITIZING SOLUTIONS: The program shall use appropriate bleach solution or other Environmental Protection Agency approved products for the routine cleaning and sanitizing of all surfaces. These shall be consistent with the recommendations of Caring for Our Children: National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care, A Joint Collaborative Project of the American Academy of Pediatrics, American Public Health Association and National Resource Center for Health and Safety in Child Care.

CLEANING AND SANITIZING ROUTINES AND SCHEDULES: The program shall post and follow a cleaning and sanitation schedule consistent with the recommendations of Caring for Our Children: National Health and Safety Performance Standards: Guidelines for Out-of-Home Child Care, A Joint Collaborative Project of the American Academy of Pediatrics, American Public Health Association and National Resource Center for Health and Safety in Child Care.

**MEALS AND SNACKS:** The center shall provide breakfast or a midmorning snack and a midafternoon snack.

- a. Meals shall be served at the center at suitable intervals. Children shall be provided with a nutritionally balanced lunch. In addition, breakfast and/or dinner shall be provided for children who are in care for more than nine (9) hours.
- b. Each meal shall include one-third of the total daily nutritional requirements. For healthy development the nutritional needs of children are met.
- i. Meals and snacks. Meals and snacks meet current Child and Adult Care Food Program (CACFP) nutritional standards for all applicable children. Snacks should include fruits, vegetables, milk; high fat, high sugar, and high salt foods are served less than one time per week or are not served
- ii. Additional servings. Additional servings:
- are available when child remains hungry; Children will not be forced to eat and food should not be used as a reward
- meet nutritional standards; and
- are not required to be the same food as the first serving
- c. Water. Safe drinking water is freely available to children both indoors and outdoors at all times. Children are encouraged to drink water throughout the day, especially before, during, and after outdoor play. Safe drinking water must be available to children at all times and must be offered at intervals that are responsive to the needs of the individual children.
- d. Milk. Children one year of age are served whole milk when not served breast milk or formula. Children two years of age and older are served skim or one percent milk.

- e. Fruit juice. If served, only 100 percent fruit juice is used. Infants are not served fruit juice. Juice is limited to a total of 4-6 ounces or less per day for children over one year of age.
- f. Sweetened drinks. Program does not serve or allow drinks sweetened artificially or with sugar, including soda and flavored milk.
- g. Caffeinated drinks. Program does not serve or allow caffeinated drinks, including soda and energy drinks.
- h. Special occasions. On special occasions, such as parties, food and drink that does not meet nutritional requirements may be served in addition to required meals and snacks
- i. If lunches or other meals are provided by the parent, the center shall have written nutrition guidelines which shall be given to parents at the time of enrollment. The center staff shall monitor meals to ensure nutritional value. All meals brought to the program must meet current Child and Adult Food Care Program nutritional standards.
- j. There shall be a supply of food available in the center to provide nutritional meals to children whose parents do not provide food and to supplement any foods brought by children which are not nutritional or of sufficient quantity.

**MENUS**: Written menus for meals and/or snacks shall be planned on a five week rotating basis and shall be posted weekly where parents can see them.

PROVIDER PARTICIPATION IN MEAL TIME: At least one child care provider sits with children at the table and eats the same meals and snacks.

INFANT/TODDLER FEEDING PLAN: A feeding plan shall be established for each infant and toddler prior to admission. The plan shall be developed in consultation with the parent and based on the recommendation of the child's health care provider. This plan shall be reviewed at least every six (6) months.

Individual feeding plans shall be followed except for toddlers who are mature enough to eat on a schedule.

**INFANT/TODDLER FEEDING:** The infant/toddler feeding program shall foster appropriate learning and pleasurable experiences. Staff shall feed infants on demand, responding to the cues they provide for hunger and when they are full. This allowsinfants to control the pace and amounts of their intake.

a.Infants who are unable to sit in feeding chairs shall be held while being fed. No bottles shall be propped at any time and no child shall ever be fed in a crib.

b.Children who are not ready for self-feeding shall be fed by an individual staff member on a one-to-one basis.

c.Self-feeding shall be encouraged. Appropriate finger foods shall be provided. A clean, sanitized training cup shall be provided for each child ready to begin drinking from a cup.

d.Solid foods shall be introduced to infants and toddlers in accordance with the physician's recommendation or as specified by the parent.

e.Single use cloths or towelettes shall notbe used for washing children's faces and hands before and after eating and as necessary.

f.A heating unit for warming bottles and food shall be readily accessible to staff.

Microwaves are not used for heating bottles. Only BPA free plastic or glass bottles should be used.

**INFANT DAILY LOG:** For each child under eighteen months of age, a daily log shall be maintained to record information on eating, drinking, changing, napping and behavior. This log shall be provided in writing to the parent.

BREASTMILK: The center shall serve breast milk that is prepared by the parent or commercial formula that is mixed and served according to manufacturer's instructions. Every effort must be made to accommodate the needs of a child who is being breast-fed. All breast milk or formula shall be clearly labeled with the child's name and date of preparation, if applicable. Bottles provided by parents should be labeled with dates and child's name. Heating breast milk and formula and other food items for infants in a microwave oven is prohibited.

Prepared formula or breast milk shall be used immediately or stored in the refrigerator at 40 degrees F or below. Such formula or breast milk shall be discarded at the end of the day.

a.Any formula or breast milk remaining in a bottle after feeding shall be discarded. b.If permanent wear bottles and reusable nipples are provided by the center for community use, they shall be washed and sanitized in a dishwasher where the water temperature is at least 180 degrees F. or boiled for at least 5 minutes.

**COMMERCIAL BABY FOOD:** If commercial baby food is provided by the parent, it shall be in the unopened original container. Any food remaining in the container after feeding shall be discarded.

**DIAPERING:** Children shall be changed and diapered regularly and shall be washed and dried with sanitary, single use cloths or towelettes.

a.The diaper changing surface shall be cleaned and sanitized with a disposable towel and disinfectant solution\_prepared daily (such as 1/2 cup of bleach mixed with 1 gallon of water or appropriate mixture as stated in "Caring for our Children", preferably in a spray bottle after each use.

b.Staff shall wash their hands thoroughly with liquid soap and warm running water after each diaper change. It is recommended that staff use disposable latex gloves for diaper changing, although the use of latex/plastic gloves does not eliminate the need for hand washing.

c.Staff shall use conveniently located, washable, plastic bag lined, covered receptacles for soiled diapers. These containers shall be emptied as often as necessary to eliminate odors. They shall be cleaned and disinfected daily. The soiled diapers shall be removed from the building daily.

d.If cloth diapers are used, no rinsing or dumping of the contents of cloth diapers should be performed at the child care facility. Soiled cloth diapers should be completely wrapped in a non permeable material stored in a location in accessible to children and given directly to the parent/guardian upon discharge of the child. The soiled diapers shall be placed in a covered container away from the children's activity and food service areas and shall be removed from the facility daily.

e.No child shall be left unattended during diapering.

**TOILET TRAINING:** Toilet training shall be an individual plan, based on the child's readiness and carried out in conjunction with the parent.

There shall be no routine attempt to toilet train children under the age of 24 months.

POTTY CHAIRS: Potty chairs shall not be permitted in center facilities.

BUCKET SEATS AND HIGH CHAIRS: Bucket seats and high chairs shall only be used for feeding, and should not be used during activity time or as a form of restraint. Children shall not be seated for periods longer than 15 minutes except when eating.

**PETS**: All pets maintained on the premises shall be kept in a safe and sanitary manner and according to state and local requirements. Children shall be protected from pets which are potentially dangerous to their health or safety. Parents are notified of any pets on the premises.

REST ARRANGEMENTS FOR INFANTS: All staff, parents/guardians, volunteers and others who care for infants in the child care setting should follow these required safe sleep practices as recommended by the American Academy of Pediatrics (AAP) Infants up to twelve months of age should be placed for sleep in a supine position (wholly on their back) for every nap or sleep time unless the infant's primary care provider has completed a signed waiver indicating that the child requires an alternate sleep. Infants should be placed for sleep in safe sleep environments which included a firm crib mattress covered by a tight fitting sheet in a safety approved crib9 the crib should meet the standards and guidelines reviewed/approved by the US Consumer Product Safety Commission (CPSC) and ASTM international ASTM, no monitors or positioning devices should be used unless required by the child's primary care provider and no other item should be in a crib occupied by an infant except for a pacifier.

#### PROHIBITED PRACTICES:

□Smoking an	nd the use of tobac	<del>co products is not p</del>	parmitted in the hi	ildings or
outdoor play:	areas or on group	ds within 25 feet of	huildings Smokii	na in any vehicle
				ig in any vernois
used by the c	enter for transport	<del>ing children is prohi</del>	hited_	
asca by the c	criter for transport	ing criticited prom	biteu.	

- □No illegal\_drugs or alcohol shall be used or permitted in the center facility...
- □No guns of any kind shall be permitted in the center facility.

PHYSICAL ACTIVITY: Each child care service shall provide a program of age and developmentally appropriate physical activity. Children ages 12 months or older attending a full-day program shall be scheduled to participate in at least 60 minutes of physical activity per day. Children attending less than a full day program shall be scheduled to participate in a proportionate amount of such activities.

**SCREEN TIME**: For programs that choose to use electronic media in their programs, the following standards apply. Screen time is looking at electronic media with a screen, including watching screens while others use the media. For programs that use TV or other screen time, the following rules must be applied:

TV or other screen time is:

1.not used for children under 2;

2.prohibited during meal and snack times. However, snacks may be provided during occasional group activities;

3.prohibited for groups when all children in group are birth through 23 months of age; and

4.limited for all other groups whether teaching personnel-directed or a child-selected activity:

- \*thirty minutes or less per day for each child or group.
- •one hour or less per evening for each child or group in evening or overnight care.

# **Exceptions to limited time include:**

- □ electronic media used for children's homework;
- <del>□e-readers for reading;</del>
- ⊟smart boards and tables if used for hands-on learning activities, such as drawing or puzzles;
- □ electronic media involving physical activity participation; and
- □occasional group activities, such as watching a movie, provided alternate supervised activities remain available to children.

#### III. THREE: ENROLLMENT AND STAFFING

**GOAL**: The program admits children who are age-appropriate. It is sufficiently staffed to provide individual attention to the children enrolled and to promote their physical, social, emotional, and cognitive development.

# A. Age for Aadmission:

- 1. The minimum age for admission shall be six (6) weeks for centers opAn infant (defined as a child between the ages of six weeks and eighteen months) is at least six weeks old for admittance to an infant program.erating programs for infants.
- 2. A toddler (defined as being between eighteen months and three years of age) is at least eighteen months of age for admittance to a toddler program.

— A child is at least three years of age for admittance to a An infant is defined as being between six (6) weeks and eighteen (18) months of age. No center shall admit children under the age of six (6) weeks in an infant program. How is this different from 1?

The minimum age for admission shall be eighteen (18)

months for centers operating programs for toddlers. A toddler is defined as being between eighteen months and three years of age. No center shall admit children under eighteen (18) months in a toddler program. How is this different from 2?

The minimum age for admission-preschool program.shall be three
 (3) years for centers operating preschool programs. No center shall admit children under three (3) years in a preschool program.

# B. Age lintegration

- <u>CenterProgram</u>s operating any combination of child carechildcare programs where age integration takes place, shall meet the more stringent regulations for licensure.
- Center Programs operating both preschool and infant and/or toddler components, where there is no age integration of children as delineated above, shall do not place an exceptionaly child above or below stipulated age requirements unless written exception is granted by the licensing agency. A developmental assessment of the child may be required for such placement. What is the definition of an exceptional child?
- CenterPrograms operating preschool programs and school age programs shall-comply as follows:
  - <u>e.a.</u> The <u>Childcare Program Regulations for Licensure preschool</u> regulations shall apply where there is age integration of both groups of children.
  - a.b. The school age regulations School Age Child Care Program Regulations for Licensure shall apply when the program is operating either in a separate facility or in a separate location in the same building where no age integration between the two programs takes place.
- C. Staff/Cehild Rratio and Mmaximum Ggroup Ssize:
  - <u>CenterProgram</u>s shall maintain the following staff to child ratios and maximum group requirements:

AGE	STAFF   CHILD RATIO	MAXIMUM GROUP SIZE
6 weeks to 18 months	1 to 4	8
18 months to 3 years	1 to 6	12
3 years	1 to 9	18
4 years	1 to 10	20
5 years	1 to 12	24

Exception may be made to the above requirements for periods not to exceed one hour duration during arrival and/or departure nap time, or special activities such as movies or musical programs. There are no exceptions to the above requirements for infants (six weeks to eighteen months); exception may only be made to the above requirements for naptime, however, staff must remain on site of the facility.

When staff members are functioning in administrative supervisory or support services roles, they shall not be counted in the staff/child ratio.

Programs serving mixed age groupings shall meet the staff/child ratio and group size requirements for the younger age if that younger age group

#### comprises more than 20% of the group.

# 3. Additional considerations:

- <u>Maximum group size is determined by the number of children</u>
   <u>cared for by a caregiver or group of caregivers in a classroom or</u>
   designated area.
- Group dividers are used and are physical barriers that completely separate groups of children.
- c. Groups may be combined for special activities such as outdoor play, meals, sleeping, or field trips.
- d. Staff/child ratios are increased to one to four for swimming and other potentially dangerous activities.
- When staff members are functioning in administrative
   supervisory or support services roles, they do not count in the staff/child ratio.
- f. Programs serving mixed age groupings meet the staff/child ratio and group size requirements for the younger age grouping.
- g. Programs that provide for inclusive settings for children with disabilities and developmental delays may have staff adult/child ratios that are better than those required above for each classroom. The staff adult/child ratios used are determined by the program in consideration of the IEPs or IFSPs for students and/or other special learning, health or social and emotional needs of the children in each classroom. If the child has an IEP or IFSP, the program will work with the school district to support the child's IEP/IFSP. Were these acronyms defined at first use?

#### D. Night-Time Care

- 1. Under no circumstances is a child in care for over twenty-four consecutive hours.
- 2. Staff member required to meet staff-child ratios is awake at all times.
- 3. A staff person remains with each group of children at all times.
- 4. Emergency lighting devices are installed throughout programs that provide night care.
- 5. Sleeping accommodations are restricted to ground floor areas.
- 6. Arrangements are made for personal hygiene, including bathing and tooth brushing.
- 7. Privacy is ensured for children while they are washing and when they are changing clothes.

#### E. Supervision:

- 1. Children shall beare under the direct supervision of child-care staff at all
- Designated staff supervises aAll aspects of the program, including toileting, resting or sleeping, eating, and outdoor play, shall be supervised by designated staff.
- 3. Supervision is defined as staff present in the room at all times and able to see and hear the children.

# F. Staffing Patterns

- 1. The grid below represents potential staffing patterns.
- 2. Programs can choose any one option listed below within a category that meets the size of their programs. Do they need to meet at least one what is the regulatory requirement here?

 Individuals need to meet the credential requirements below to serve in these positions, which are listed in the staff qualifications section of these regulations.

One Classroom	Two to Four Classrooms	5 or more classrooms
Administrator (part time)	Administrator (part time)	Administrator (full time)
Ed. Coordinator (part time)	Ed. Coordinator (part time)	Ed. Coordinator (full time)
Teacher (full time)	<u>Teachers</u>	<u>Teachers</u>
Teacher Assistant (full time)	Teacher Assistants	Teacher Assistants
Administrator/Ed. Coordinator	Administrator/Ed. Coordinator	Administrator (part time) +
(part time in each role)	(part time in each role)	Administrative Assistant (part
Teacher (full time)	<u>Teachers</u>	time)
Teacher Assistant (full time)	Teacher Assistants	Ed. Coordinator (full time)
		<u>Teachers</u>
		Teacher Assistants
Administrator (part time)	Administrator (part time)	Administrator/Ed.
Ed. Coordinator/Teacher (full	Ed. Coordinator/Teacher (part	Coordinator (part time in
<u>time)</u>	time in each role)	each role)
Teacher Assistant (full time)	<u>Teachers</u>	<u>Teachers</u>
	Teacher Assistants	<u>Teacher Assistants</u>
Administrator/Ed.	Administrator/Teacher (part	
Coordinator/Teacher (full	time in each role)	
<u>time)</u>	Ed. Coordinator (part time)	
Teacher Assistant (full time)	<u>Teachers</u>	
	Teacher Assistants	

G. Full-time staff: Full-time staff shall beis defined as working in the program for no less thanat least 30-thirty hours per week for centers which programs, that operate full-dayfull day programs.

DIRECTOR: Each center shall have a director who shall be responsible for its overall operation in compliance with these regulations.

The director may be a part-time position, no less than 15 hours per week in one center. In the absence of the director, another qualified staff member shall be designated to assume administrative responsibilities.

In centers with a total maximum capacity of more than 40 children:

- •The director shall not be counted in the staff/child ratio
- •A director who also serves as head teacher shall have administrative assistance.

•

In centers with a total maximum capacity of 40 children or fewer:

The director may also function in an additional staff capacity after the duties and responsibilities of the director's role have been discharged provided the qualifications for the staff position are met.

HEAD TEACHER: Each center shall have at least one head teacher who shall be responsible for the development and implementation of the educational/developmental curriculum and program, the organization of children's groups and staff performance.

In centers with a total maximum capacity of more than 40 children:

•The head teacher shall be a full-time staff person working in the program no less than 30 hours per week for centers which operate full-day programs.

•No more than 50% of the head teacher's time shall be spent in direct teaching. The head teacher shall only be counted in the staff/child ratio during the time spent in direct teaching. A head teacher who also serves as director shall not be counted at any time in the staff/child ratio.

In centers with a total maximum capacity of 40 children or fewer:

- •If the director is full-time and meets the specified qualifications, the head teacher may be part-time, working on-site no less than 15 hours per week. A minimum of 10 of the 15 hours shall be during the time when the educational/developmental curriculum is being implemented.
- •A head teacher who also serves in the capacity of director shall be a full-time staff member.

# H. Group Sstaffing:

- Each centerprogram shall have has one staff member at the level of teacher assistant or beyond for each group of children as defined in #3 above. Who defines these job titles? DCYF? RIDE?
- These staff shall work under the supervision of the <u>Eeducation</u> Ceoordinator (Ed. Coordinator in chart above) head teacher.

# I. Staff Person in Ceharge:

- In the absence of the director and head teacher, administrator and the eEducation Ceoordinator, there shall beis a staff person is designated to be in charge.
- This person shall beis knowledgeable in the overall functioning of the centerprogram and shall-maintains responsibility for staff supervision during the times that they are in charge.

#### J. Nurse:

- CenterPrograms serving infants under the age of 18 eighteen months shall have a nurse on the premises a minimum of three hours per day at a time when most of the children are received for care.
- The nurse shall:
  - a. \_\_a. \_\_Coordinates the depth and scope of health services provided:
  - b. Participates in the enrollment decision-making process in collaboration with other appropriate staff members;
  - c. \_\_e. —Provides on-site supervision and monitoring of the health status of all infants enrolled in the centerprogram;
  - d. \_\_d. \_\_Maintains responsibility for the health records of the children enrolled in the centerprogram;
  - <u>e.</u> Serve<u>s</u> as a health consultant to staff and families and <u>be is</u> the primary liaison to health consultants and services outside the <u>centerprogram</u>;
  - f. e. The nurse mayMay also function in an additional staff capacity after the duties and responsibilities of the nurse's role have been discharged.
  - g. Program may choose to hire a childcare health consultant in lieu of a nurse in accordance with the American Academy of Pediatrics, Healthy Child Care America http://www.healthychildcare.org/WorkWithHP.html.- Where is this defined?

# K. Consultative Mmedical Sservices:

- Center Programs serving children over 18 months of age shall have the consultant services of a licensed physician or registered nurse readily available the consultant services of a licensed physician or registered nurse.
- The <u>centerprogram shall have has</u> access to such professional services at all times when children are in care.
- There shall be a The program hasmust have a letter of understanding to document the availability of these services.

# L. Auxiliary Setaff:

- 1. Provision shall be are made to carry out the necessary clerical, housekeeping, kitchen and maintenance functions needed to insure the smooth running of the centerprogram.
- 2. Child-caring staff members may perform these functions, but shall are not be counted in the staff/child ratio while doing so.
- M. A Food service worker: Centerprograms whose enrollment exceeds 20-twenty children and which prepares and serves meals, shall employs at least one part-time or full-time food service worker-if the centerprogram prepares and serves meals.

# N. Volunteers: Volunteers:

- shall not beare not counted as staff when scheduling to meet staff/child ratios, however may be counted in the staff/child ratio when scheduled staff are absent due to illness or emergency, provided that the volunteer has fulfilled all staff requirements as delineated in these regulations.
- Volunteers shall be allowed to be counted in the staff/child ration when scheduled staff are absent due to illness or emergency provided that the volunteer has fulfilled all staff requirements.
- All volunteers shall be carefully screened and given a formal orientation to center policies and procedures.
- 2. are eighteen years of age or older.
- 3. are cleared and approved By whom is this DCYF policy? If so, specific site and hyper link, in accordance with Section V. Employment Background Check Criminal Record and Clearance of Agency Activity Checks, below.
- 4. receive a formal orientation to program policies and procedures, and the volunteer assignment.
- 5. swork under the supervision of program staff and are not left alone with children or engage in any disciplinary action with a child.
- 6. If teen volunteers are engaged, an adult supervisor who is physically present at all times closely monitors him or her.
  - a. Teen volunteers are sixteen years of age.
  - b. What is the difference between this and #6?Programs obtain a signed consent agreement from parent of teen volunteer stating that they approve of the volunteer assignment. Parent of the teen or parent of the child in care?
  - <u>Program has copies of the teen volunteer's emergency contact</u> <u>information. The teen or the child and if the child why is that in</u> this list?
  - d. Program has a copy of the teen volunteer's signed school physical form. The teen or the child and if the child why is that in this list?

# O. Staffing Plan

- 1. The program has a staffing plan and schedule for each classroom including a list of qualified substitutes.
- STAFF COVERAGE: There shall be are at least two or more staff members on site at all times.

#### P. Substitutes:

- There shall be Program maintains a list of substitutes who can be called upon cover in the event of the absence of a staff member in order to maintain the required staff-child ratio.
- 2. Substitutes shall-meet staff requirements.
- 3. <u>Long termLong-term</u> substitutes shall-meet the staff qualifications for the assigned position.
- 4. Long-term substitutes are needed when a person is out for twenty or more consecutive days.

CHILDREN WITH SPECIAL NEEDS: Group size, staff rations and provision of other services shall meet the specifications of the Individualized Family Serve Plan (IFSP) or the Individualized Education Plan (IEP) of children with special needs and shall be in accordance with the regulations of PL 99-457 or PL 94-142 as appropriate.DISCIPLINE:

Staff shall serve as a positive role model for the children in care.

Staff shall use positive methods in guiding children back on task, shall encourage appropriate behavior, and set clear limits and rules that children can understand.

Staff shall match their expectations with the children's developing abilities and capabilities.

Staff shall praise the children's accomplishments as well as their attempts at tasks.

Staff shall use positive, firm limit setting in situations where a child's safety is at stake.

Staff shall assist children by redirecting them from inappropriate actions to activities that are more favorable.

# **CORPORAL PUNISHMENT:**

Staff shall not hit the children or engage in any form of corporal punishment.

Children shall not be subjected to cruel or severe punishment, humiliation or verbal abuse.

Children shall not be derived of meals or snacks as a form of discipline.

Children shall not be punished for soiling, wetting, or not using the toilet.

# **FOUR: PHYSICAL FACILITIES**

**GOAL**: The indoor and outdoor facilities foster the children's growth and development through a variety of opportunities for safe exploration and learning.

INSPECTIONS: The physical facilities shall be in compliance with local zoning ordinances and with the applicable sections of the State Building, Fire, Health and

Sanitation Codes. Prior to licensing, the water in the facility shall be tested and shown to be below maximum acceptable standards for lead in drinking water and facilities.

# **Physical facilities must:**

- a.Be in compliance with building and fire codes.
- b. Provide evidence of being lead free or safe water,
- c.Provide evidence of being asbestos-free or safe,
- d. Have an acceptable score on a radon test within the last 3 years and
- e.Have a public water supply or a Department of Health certificate related to a water supply of drinking water quality, including evidence of water being lead free or safe.

Prior to licensing, the water in the facility shall be tested and shown to be below maximum acceptable standards for lead in drinking water.

**ADA:** The program must be accessible for children and adults with disabilities in accordance with disabilities requirements including the American with Disabilities Act (ADA).

**REVIEW OF PLANS**: Plans for the erection of new buildings or playgrounds or for the renovation or modification of existing buildings or playgrounds shall be submitted to the Department for review prior to the start of construction.

**EXTERIOR DOORS**: The program's exterior doors shall be locked. The program's designated main entrance(s) shall have a doorbell, buzzer, keypad, swipe card or other comparable means for entrance. Any unlocked doors shall be monitored at all times by a staff person.

LOCATION OF CHILD CARE ROOMS: Center rooms for infants and/or toddlers shall be located on the first floor, ground level where there is direct access to the outside without the use of stairs. Center rooms for preschool children, ages 3 to 5 years, shall be permitted on the first or second floor. All facilities, which include classrooms, bathrooms, gross motor spaces and libraries, used by the children shall be conveniently located on the same floor level as the activity rooms or classrooms. No facilities used by the children shall be located below ground level. When a classroom for preschoolers is located on the second floor, the evacuation plan must be appropriate for children of that age and developmental ability.

**STAIRWAYS**: Stairways used by children shall have a second railing placed at the appropriate height for the children's use.

**VENTILATION AND LIGHTING:** There shall be adequate ventilation and artificial lighting throughout the center facility. All activity rooms used for children shall have provision for natural lighting through a window or a skylight directly to the outdoors. Exterior doors and windows which are opened for ventilation shall be securely screened. The temperature in rooms used by children shall be maintained within a range of 65 – 74 degrees F at the level of the children's height and the heat shall be kept constant. Rooms where infants are cared for shall be maintained at a minimum of 68 degrees F at crib height. There shall be a minimum of 300 cubic feet of air space for each child. Facility should use only approved sources of heating and portable space heaters are prohibited.

SQUARE FOOTAGE: There shall be a minimum of 45 square feet of usable floor space

for each child in activity rooms or classrooms used for infant and/or toddler care. There shall be a minimum of 35 square feet of usable floor space for each child in activity rooms or classrooms used for the care of preschool children, ages 3 to 5 years.

CLASSROOM/ACTIVITY ROOM: A classroom is defined as a group of children in a room with floor to ceiling walls. If floor to ceiling walls are not possible, then stable partitions of at least 4 feet in height shall divide the classroom and completely separate groups of children as defined in Standard 3.

**INFANT AND TODDLER SPACE**: Children under the age of 3 years shall have rooms or areas physically separate from those used by children 3 years and over. Transition rooms or areas shall be permitted for children who are between 33 months and 39 months of age.

**AREAS:** Indoor activity shall be clearly defined by spatial arrangement. Space shall be subdivided into areas and be arranged to provide clear pathways for movement from one area to another, to separate noisy activities from quieter ones, and to provide for visual supervision by staff. Furniture shall be placed to ensure safety and ease of supervision.

**STORAGE SPACE**: There shall be adequate space for the storage of individual clothing with hooks at children's level for the use of toddlers and preschool children. There shall be adequate storage space for equipment, including cots and blankets, materials, supplies, and seasonal toys.

**ISOLATION AREA:** There shall be an isolation area equipped with a cot to accommodate a child who becomes ill. This area shall be located near a lavatory and be visible for staff supervision. <u>Sick child must be isolated a minimum of 3 feet away from the other children.</u>

**UTILITY ROOM:** There shall be a utility room, separate from the kitchen, with hot and cold water and storage space for cleaning equipment and supplies.

OFFICE SPACE: There shall be space provided for administrative and clerical functions.

OUTDOOR PLAY AREA: There shall be an appropriately equipped outdoor play area for gross motor activity. The outdoor play area shall have at least 75 square feet of space for at least 50% of the capacity of the center, be easily accessible With a plan for how the outdoor space will be utilized in a way that supports quality programming and ensures safety. It shall be safe, properly fenced with fencing of at least four (4) feet in height, reasonably level, well-drained, and free from hazards. Climbing equipment, swings, and large pieces of play equipment shall be developmentally appropriate for the ages of children in that area and securely anchored and maintained in good repair. Outdoor equipment, including, but not limited to, swings, slides, and climbing apparatus, shall be age and developmentally appropriate, shall be installed, maintained, and used in accordance with manufacturers' specifications and instructions, approved by the US Consumer Product Safety Commission, and maintained in good repair. Cushioning materials such as mats, wood chips, or sand shall be used under climbers, slides, revolving equipment or swings. If organic cushioning (i.e. sand, wood chips, etc.) is used, it shall be of at least 6" in depth. The outdoor play area for infants and/or toddlers shall be separate from that used by older children.

TOILET FACILITIES: Centers serving children under the age of 36 months shall have one toilet and one sink for each group of 20 children. Centers serving children 3 years and older shall have one toilet and one sink for each group of 10 children. Hand washing sinks shall have both warm and cold running water or one temperature faucets set to appropriate hand washing temperatures. Water temperature should be at least 60 degrees and not to exceed 120 degrees. There shall be a diaper changing area and an adjacent adult hand washing sink with warm and cold running water for each group of 20 children under the age of 3 years. Diaper changing areas and adult hand washing sinks shall be separate and apart from any food preparation area. There shall be separate toilet facilities in the same building for staff.

**DRINKING WATER**: There shall be drinking water readily available indoors and outdoors to children while they are in care. Water shall be made available and shall be easily accessible to children throughout the day, including at all meals. Drinking water supplies shall be located in or near classrooms and playrooms. Drinking cups shall be single-use and disposable. The source of drinking water shall be separate from the lavatory. Water fountains shall not be used in the child care facility, unless disposable single use cups are used.

**FOOD PREPARATION AREA**: There shall be an appropriately equipped kitchen for food preparation when meals are prepared at the center. When meals are not prepared at the center, there shall be an appropriately equipped food preparation area to be used exclusively for food handling and distribution, including the preparation of snacks. The kitchen or food preparation area shall be sanitary, well lighted, and orderly, with refrigeration temperatures of 41 degrees F. or lower for refrigerator and 0 degrees F. or lower for freezer\_appropriate safeguards for the storage and handling of supplies, and means for sterilizing dishes or providing disposables.

**CLEANLINESS**: All parts of the center and its premises shall be kept in good repair, clean, neat, and free of hazards. US environmental protection agency-registered products for cleaning, sanitizing, and disinfecting used in accordance with the manufacturers' instructions.\_Maintenance of the facility shall be done when children are not present.

For additional guidance on safely preparing bleach solutions, visit: http://www.ucsfchildcarehealth.org/pdfs/healthandsafety/ipm\_sanatizing\_en1110.pdf

Additionally, fundamental methods for achieving the control of rodent and insect infestation shall be used, including:

- Good sanitation and proper screening;
- Proper use of insecticides and rodenticides;
- •Structure blocking of avenues through which insects and rodents could gain access to the building; and
- •Insecticides and rodenticides used approved by the Rhode Island Department of Health.

**TELEPHONE:** There shall be a telephone, other than a pay phone, conveniently located within the center facility. The telephone shall be kept in working order and shall be readily available for use in case of an emergency. Emergency phone numbers, including

911, local fire and police departments, emergency treatment facility, consulting physician or nurse, and poison center shall be posted in a conspicuous place, adjacent to the phone. Staff shall not use cell phones for talking or texting while supervising children.

**FURNITURE**: There shall be a sufficient quantity of furniture in the center to accommodate the number of children to be enrolled. Furniture shall be safe, durable, child-sized and easily cleaned. It shall conform to all applicable safety regulations. Seating shall be provided for every child.

COTS AND CRIBS: A cot shall be provided for each preschool child. A cot or a full sized crib shall be provided for each toddler... Cots will not be used for children under 12 months of age. A crib shall be provided and used for each infant in care. There shall be one crib equipped with wheels for every five (5) children under 2 years. This crib shall be used for evacuation in the event of an emergency. Cribs and cots shall be washed and sanitized before reassignment to another child. There shall be at least two (2) feet of space between each cot or crib during nap/rest time. Cribs must meet Consumer Product Safety Commission Standards and documentation is maintained at the facility. No "pack — n — plays" or playpens are allowed.

AUDIO-VISUAL EQUIPMENT: Audio-visual equipment, when utilized, shall be appropriate for the age and developmental level of the children enrolled.

**INFANT EQUIPMENT:** The infant area shall contain comfortable seating for staff, including at least one rocking chair. The center shall insure that an adequate supply of clean diapers, bed linens and clothing changes are available. The center shall have a choke prevention gauge which can be used to determine if an object is large enough so as not to be swallowed by a child. The use of walkers is prohibited.

**SAFETY:** All equipment and materials shall be kept clean and sanitary and shall be checked regularly to ensure freedom from hazards.

**SHARED USE OF PREMISES:** It is preferable that the premises not be shared by other groups when the program is not in operation. However, with sufficient safeguards for cleanliness, protection of equipment, and general sanitation, dual occupancy may be permitted. A formal request for approval for shared use of the premises shall be appended to the application.

# IV. FOUR: STAFF QUALIFICATIONS AND ONGOING PROFESSIONAL DEVELOPMENT REQUIREMENTS

GOAL: The program is staffed by adults who understand child development and who recognize and provide for the children's needs.

DIRECTOR QUALIFICATIONS: The director in a center where there is a full-time head teacher shall have experience in administration or professional preparation in a field appropriate for those who work with young children.

The director in a center where there is a part-time head teacher shall meet one of the following:

\*Hold a Bachelor's Degree and have completed at least four courses at the postsecondary level in Early Childhood Education and/or Child Development; or

•Hold an Associate's Degree in Early Childhood Education or Child Development and have a minimum of 3 years experience working in a licensed/approved early childhood program; or

◆Hold a Child Development Associate Gredential (GDA) for the age level to be served in the center; have successfully completed at least four courses in Early Childhood Education and/or Child Development at the post-secondary level; and have a minimum of three years experience working in a licensed/approved early childhood program; or ◆Have successfully completed at least six courses in Early Childhood Education and/or Child Development at the post-secondary level and have a minimum of five years experience working in a licensed/approved early childhood program.

#### A. Administrator

- 1. Each program has an administrator who is responsible for the overall operation in compliance with these regulations.
- This role may be assumed by the childcare program director, executive director, education manager or program director who meets the following qualifications.
  - a. Option One: Full-time Education Coordinator.
     i. administrator in a program where there is a full-time
    - Eeducation Ceoordinator has experience in administration and/or business management.

      Option Two: Part-time Education Coordinator
  - i. administrator in a program where there is a part-time

    Eeducation Ceoordinator has experience in administration and/or business management;
    - ii. has successfully completed at least eighteen credits in

      Early Childhood Education and/or Child Development at
      the post-secondary level; and
    - iii. has a minimum of three years of experience working in a licensed/approved early childhood program.

TEACHER QUALIFICATIONS: Same as above for head teacher.

ASSOCIATE TEACHER QUALIFICATIONS: An associate teacher shall meet one of the following:

•Hold an Associate's Degree in Early Childhood Education or Child Development; and have a minimum of three months supervised teaching experience in a licensed/approved early childhood/program for the appropriate age level (student teaching may fulfill this requirement);

Ωr

■Hold a high school diploma or high school equivalence and a Child Development Associate (CDA) credential; and have completed 15 credits in Early Childhood Education and/or Child Development at the post-secondary level; and have a minimum of three months supervised teaching experience in a licensed/approved early childhood program;

Or

•Hold a Bachelor's or Associate's Degree in a related filed such as child study, child psychology, early childhood special education, elementary education, or nursing and have competed two courses in child development or early childhood education (one of which must be in child development); and have a minimum of one years' supervised teaching experience in a licensed approved early child program.

TEACHER ASSISTANT QUALIFICATIONS: An assistant teacher shall meet one of the following:

- •Hold a Bachelor's or Associate's degree in a related field such as child study, child psychology, early childhood special education, special education, or nursing; Or
- •Hold a Child Development Associate credential (CDA);

Or

•Hold a high school diploma with a vocational concentration in child care that includes two (2) years of supervised experience in a licensed/approved early childhood program; Or

•Hold a high school diploma or its equivalent, and have three (3) years of supervised experience in a licensed/approved early childhood program or certified family day care home; ad have a history of regular participation in a ongoing early childhood staff development program.

TEACHER AIDE QUALIFICATIONS: A teacher aide shall have be at least 18 years old, and have or be working toward a high school diploma or equivalent; and participate in an engoing early childhood staff development program.

NURSE QUALIFICATIONS: The nurse shall possess appropriate education and training to work with infants and their families and shall be currently licensed by the state as a registered nurse or a licensed practical nurse.

AUXILIARY STAFF QUALIFICATIONS: The qualifications of other staff employed to carry out clerical, housekeeping; kitchen or maintenance functions shall be consistent with the skills needed to perform the respective job. Kitchen staff must participate in 8 hours of training each year.

CONSULTANTS: When the center employs or uses the services of other professional staff such as physicians, psychiatrists, social caseworkers, psychologists, or nurses, these persons shall meet the minimum professional standards in their particular field. Professional persons whose practice is regulated by state law shall meet the requirements mandated by the State of Rhode Island in their respective fields.

ORIENTATION: The center shall provide a formal orientation for all new staff and volunteers. A signed and dated description of the information covered in the orientation shall be kept on file in the center for review by the Department representative during monitoring visits.

PROFESSIONAL DEVELOPMENT: All child-caring staff, including the administrator and education coordinator, shall complete a minimum of twenty hours per year of training and aligned with the Workforce Knowledge and Competencies aligned to their individual role.

The Education Coordinator in conjunction with the Administrator shall be responsible for developing and overseeing an individualized training plan for each staff person.

Training shall be in areas relevant to the care of young children and shall be directed towards transferable skills rather than center specific knowledge.

Training may consist of workshops/seminars conducted by recognized professionals in the field; professional conferences; courses at an approved or accredited institution of higher education; or other similar professional activities such as classroom observation, reading relevant books and articles, etc.

#### B. Education Ceoordinator

- Each program has a person assigned to the role of Education
   Coordinator. This person is responsible for:
  - a. the development and implementation of the early learning and development program, including classroom curriculum;
  - b. the organization of children's groups; and
  - c. staff performance.
- 2. This role may be assumed by, the program director, education manager, teacher or consultant who meets the following qualifications:

- Option One: Holds a current RIhode Island Department of <u>Education teacher certification for grades pre-kindergarten to</u> second grade.
- b. Option Two: Hold a bachelor's or master's degree in a related field such as child development, elementary education or special education with twenty-four credits in early childhood education from an accredited or approved institution of higher education.
- c. Option Three: Holds a current RIhode Island Department of Education teacher certification for early childhood special education, which includes early childhood certification.
- 3. A minimum of three months supervised teaching experience in a licensed/approved early childhood program for the appropriate age level (student teaching may fulfill this requirement).

#### C. Teacher

- 1. Each group of children has an individual who works under the supervision and guidance of the education coordinator to care for the children and implement the classroom curriculum, and who, at a minimum, meets the following qualifications:
  - Option One: Holds a high school diploma with a vocational concentration in child care that includes two years of supervised experience in an licensed/approved early childhood program;
  - Option Two: Holds a high school diploma or its equivalent; and
     i. Has three years of supervised experience in a licensed/approved early childhood program or certified family day care home; and
    - ii. Has a history of regular participation in an ongoing early childhood staff development program.
- D. Each group of children has an individual who is responsible for assisting the teacher in the care and early learning of children and is at least eighteen years old; has a GED or high school diploma and participates in an ongoing early childhood staff development program.

#### E. Administrative Assistant

- 1. The administrative assistant assists the administrator in the overall operations in compliance with these regulations.
- 2. Has experience in administration or have professional preparation in a field appropriate for those who work with young children.
- F. Nurse qualifications: The nurse shall possess of program employs a nurse, he or she has appropriate education and training to work with infants and their families and shall be currently licensed by the state as in Rhode Island as a registered nurse or a licensed practical nurse. Any state or just Ri?

# G. Auxiliary Setaff Qqualifications:

- 1. The qualifications of other staff employed to carry out clerical, housekeeping; kitchen or maintenance functions shall beis consistent with the skills needed to perform the respective job.
- 2. Kitchen staff participate in eight hours of training each year.
- <u>Consultants:</u> When the <u>centerprogram</u> employs or uses the services of <u>other consultants or other</u> professional staff such as physicians, psychiatrists, social caseworkers, psychologists, or nurses, these persons <u>shall</u> meet the <u>minimum</u>

professional standards required by the Rhode Island Department of Health. in their particular field. According to what authority?

Professional persons whose practice is regulated by state law shall meet the requirements mandated by the State of Rhode Island in their respective fields. RI or any state

#### I. Orientation:

- The centerprogram shall provides a formal orientation for all new staff and volunteers.
- The orientation shall include a review of the regulations for licensure and the state law governing child abuse and neglect, as well as center polices and procedures and other information specific to the operation of the program.
  - \_\_\_\_All new staff and volunteers shall be oriented during their first week in the program.
- A description of the information covered in the orientation shall be kept on file in the center for review by the Department representative during monitoring visits.
- A signed and dated description of the information covered in the orientation is kept on file in the program for review by the Department representative during monitoring visits.

# J. Professional Delevelopment:

- 1. All child-caring staff, including the <u>administrator and education</u>

  <u>coordinator director and head teacher</u>, <u>shall complete complete</u> a

  minimum of two hours per month or twenty hours per year of training <u>and</u>

  <u>aligned with the workforce knowledge and competencies relevantaligned</u>

  <u>to theirindividual role</u>. The hours are already stated above why are they repeated here?
- The education coordinator in conjunction with the administrator is responsible for developing and overseeing an individualized training plan for each staff person.
- Training shall beis in areas relevant to the care of young children and shall beis directed towards transferable skills rather than centerprogram specific knowledge. How is this different from 1?
- Training may consist of workshops/seminars conducted by recognized professionals in the field; professional conferences; courses at an approved or accredited institution of higher education; or other similar professional activities such as classroom observation, reading relevant books and articles. etc.

# V. EMPLOYMENT BACKGROUND -CRIMINAL RECORD -AND CHILD ABUSE AND NEGLEST NEGLECT TRACKING SYSTEM-CLEARANCE OF AGENCY ACTIVITY (CPSCANTS) CHECKS CPS?

- A. The centerprogram director shall beis responsible for insuring that employment background checks, criminal record checks, and clearance of agency activity checks CANTS checks are conducted on all new staff prior to the assignment of child care duties, including consultants, whether full or part-time, who:
  - i.1. hHave supervisory or disciplinary power over children; or
  - 2. <u>h</u>Have routine contact with children without the presence of other staff. Need specific cites to exact DCYF policies with appropriate hyperlinks.

- Staff whose duties do not conform to the above stipulations shall not be required to have the criminal record check or CANTS check. In such cases the center shall provide the Department with written confirmation that the employees duties do not involve supervisory or disciplinary power over children or routine contact with children without the presence of other staff. The written confirmation shall be field with the Department prior to employment and a copy shall be placed in the employee's personnel file.
- B. Employment Beackground Ceheck Have these been carefully synced to this policy?:
  - The employment background check shall consist of the following:

    i.Completion of an Employment History Affidavit by the applicant, identifying places of employment, addresses, dates, and supervisors for the past thirty-six months. Employment shall include part-time, full-time, and/or volunteer.
  - 1. Verification by the center of employment information for the past twelve months. Verification may be by telephone or in writing. Verification shall include the name, address, and title of the person verifying and an assessment of the reliability, performance, and eProgram conducts an employment background check on each applicant in compliance with DCYF Policy 900.0035, Employment Background Checks: Facility Operators/Employees and Family Child Care Operators/Employees (http://sos.ri.gov/rules/).
  - 2. The affidavit and verification shall beis completed and placed in the personnel file prior to the applicant beginning the job assignment.
  - The affidavit and verification shall be completed and placed in the personnel file prior to the applicant beginning the job assignment.
- C. Criminal Record Ceheck Have these been carefully synced to this policy?

  The criminal record check shall consist of the following:
  - ii. Completion of a Criminal Record Affidavit by the applicant.
  - iii. The taking of the applicant's fingerprints by the bureau of criminal identification of the state or local police.
  - iv.Comparison of the applicant's fingerprints with those on file through the national criminal identification computer operated by the Federal Bureau of Investigation (FBI).
    - v.1. Notification by the Bureau of Ceriminal Lidentification that the applicant does or does not have disqualifying information (see Appendix). Program conducts criminal records on each applicant in accordance with DCYF Policy 900.0040, Criminal Record Background Check(s) (http://sos.ri.gov/rules/).
      - vi.a. If the applicant has undergone a criminal records check in accordance with these regulations in the eighteen (18) months prior to the date of application, a letter from the police verifying the date and results of that check shall be acceptable.
      - <u>vii.b.</u> The affidavit shall beis completed and fingerprints taken prior to the applicant beginning the job assignment. The affidavit and documentation of fingerprinting shall beis placed in the employee's personnel file.
      - c. Within ninety (90) calendar days of hiring, notice shall beis placed in the personnel file identifying the results of the criminal records check. If notice is not received within ninety (90) days, the applicant shall beis relieved of child caring responsibilities.
    - 2. Disqualifying Linformation:
      - a. If notification is received that disqualifying information has

immediately notifiesy the employee in writing that his/her employment will be terminated in ten (10) working days. A copy of this letter shall gois sent to the Department of Children, Youth and Families Administrative Hearing Officer.'s licensing unit. This letter shall informs the employee of the right to appeal. Is this a reference to our complaints and hearing policy - if so, must be complete and hyperlinked., in compliance with DCYF Policy 100.0055, Complaints and Hearings (http://sos.ri.gov/rules/). Clearance of Agency Activity CANTS check - Is this an abuse and neglect exactly - with appropriate hyperlink.: Program conducts clearance of agency activity checks on each applicant in accordance with DCYF Policy 700.0105, Clearance of Agency Activity (http://sos.ri.gov/rules/). The CANTS check shall consist of the following: i. Completion of a request for DCYF Clearance by the applicant. ii. Forwarding of the DCYF Clearance form to the Department for screening against the CANTS computer file. RESULTS OF CANTS CHECK: The Department shall notifiesy the centerprogram and the applicant in writing of the results of the clearance of agency activity check. CANTS check. The applicant shall be cleared when: i. There are no CANTS findings: ii. The applicant is identified as a non-involved adult in a CANTS investigation: iii. The CANTS record identifies the applicant as the perpetrator in an investigation but the finding is classified as an Early Warning or Unfounded. iv. The applicant shall not be disqualified from employment when he/ she is identified as the perpetrator in an indicated CANTS investigation not listed on the CANTS Check Addendum Disqualifying Information (see Appendix). v.The applicant shall be disqualified from employment when he/she is identified as the perpetrator in an indicated CANTS investigation listed on the CANTS Check Addendum - Disgualifying Information. CANTS investigation - indicated perpetrator: The centerprogram administrator shall-immediately relieves an employee from child caring duties when notice is received from the Department that the employee is identified as a perpetrator in an indicated Child Protective Services (CPS)CANTS investigation listed on the Clearance of Agency Activity CANTS Check Addendum - Disqualifying Information. Is this the exact name? Appeal of Ddisqualification - criminal record checks or isqualifying InformationCANTS check -Within fiveten (5) working days of receipt of written notification of disqualifying information, the applicant or employee shall put the Department and the center administrator may appeal the finding on notice as to the intent to appeal by filing a Request for Hearing in accordance with DCYF Policy 100.0055, Complaints and Hearings (http://sos.ri.gov/rules/).

beenwas found, the centerprogram administrator shall

- 2. The applicant shall attaches a copy of his/her report of disqualifying information which identifies the specific disqualifying information.
- 3. -A copy of this material shall also seen to the centerprogram director.
- 4. b. Within ten (10) working days of submitting the Request Forfor
  Hearing, the applicant shall provides written references attesting to
  excellence in child-care sufficient to warrant disregard of the otherwise
  disqualifying information. Such references shall beare from individuals
  who are qualified by virtue of education and/or experience to testify as to
  the abilities of the applicant. Such individuals include:
  - <u>i.a.</u> Licensed child carechildcare providers.
  - <u>ii.b.</u> Current or previous child carechildcare professionals.
  - <u>iii.c.</u> Other professionals with <del>credentials which would enable them to effectively judge the applicant's qualifications in providing childcredentials that would enable them to judge effectively the applicant's qualifications in providing child care.</del>
- <u>c.5.</u> The <u>Administrative</u>-Hearing Officer <u>shall</u>-reviews the materials submitted and rules on the appeal within <u>seventy-two (72) seventy-two</u> hours of receipt of all materials.
- 6. If the applicant has not demonstrated a record of excellence in child-care sufficient to warrant disregard of the otherwise disqualifying information, the Administrative-Hearing Officer shall-upholds the denial and notifiesy the applicant of the reason for the decision.
- d.7. The centerprogram shall only beis only notified that when the applicant has not demonstrated a record of excellence sufficient to warrant disregard of the disqualifying information.
- 8. If the applicant has demonstrated a record of excellence in child carechildcare sufficient to warrant disregard of the otherwise disqualifying information, the Administrative Hearing Officer shall notifiesy the applicant and the centerprogram in writing.

# **FIVE: EQUIPMENT AND MATERIALS**

**GOAL**: The equipment and materials are sufficient in quantity and are suitable for the developmental level of the children enrolled. There is a variety of equipment and materials to allow for a wide range of abilities and patterns of growth.

- 2. **FURNITURE**: There shall be a sufficient quantity of furniture in the center to accommodate the number of children to be enrolled. Furniture shall be safe, durable, child-sized and easily cleaned. It shall conform to all applicable safety regulations. Seating shall be provided for every child.
- 3. <u>COTS AND CRIBS</u>: A cot shall be provided for each preschool child. A cot or a full sized crib shall be provided for each toddler. A crib shall be provided for each infant. There shall be one crib equipped with wheels for every five (5) children under 2 years. This crib shall be used for evacuation in the event of an emergency. Cribs and cots shall be washed and sanitized before reassignment to another child. There shall be at least two (2) feet of space between each cot or crib during nap time.
- 4. <u>MATERIALS AND EQUIPMENT</u>: All equipment and materials used in the center program shall be:
  - **♦Safe:**
  - ◆Durable:
  - ◆Appropriate for the age level of the children and stage of development;
  - ◆Sufficient in quantity for the number of children enrolled;

◆Accessible to the children, promoting exploration.

Materials which require staff supervision shall be stored out of children's reach.

5. TODDLER AND PRESCHOOL MATERIALS: Materials shall be provided for at least the following learning areas:

- ◆Art:
- **◆Blocks**:
- **♦Books**:
- ◆Dramatic play;
- **♦Science:**
- ◆Music:
- **♦**Manipulatives;
- **♦**Large motor activity.

Materials shall represent a variety of racial, cultural, linguistic, and age attributes.
6. <u>AUDIO-VISUAL EQUIPMENT</u>: Audio-visual equipment, when utilized, shall be appropriate for the age and developmental level of the children enrolled.

- 7. INFANT EQUIPMENT: The infant area shall contain comfortable seating for staff, including at least one rocking chair. A bath tub or plastic basin for bathing children shall be available. The center shall 27 -insure that an adequate supply of clean diapers, bed linens and clothing changes are available. The center shall have a choke prevention gauge which can be used to determine if an object is large enough so as not to be swallowed by a child.
- 8. INFANT MATERIALS: Materials shall be provided which stimulate infant development. A selection of the following types of play things shall be provided:
  - **♦Blocks:**
  - **♦Busy boards**;
  - **♦Balls**:
  - **◆Cuddly toys**;
  - ◆Pull tovs:
  - ◆Sorting toys;
  - ◆Kitchen tovs:
  - ◆Musical and auditory stimulation toys:
  - **♦Nesting and stacking toys:**
  - ◆Rattles and squeeze toys;
  - ♦Mirrors;
  - ◆Books:
  - ◆Mobiles and cradle gyms;
  - **♦Climbing equipment**;
  - **♦Riding toys.**
- 9. <u>SAFETY</u>: All equipment and materials shall be kept clean and sanitary and shall be checked regularly to ensure freedom from hazards.

## VI. FIVE: ADMINISTRATION:

Program demonstrates fiscal responsibility and stability. GOAL: The center is administered in a responsible manner and the staff is supported in their efforts to provide a high quality program.

- A. FINANCIAL RESOURCES: Financial resources shall be such as to ensure the center's security in its own future and stability in the community.
- B. INSURANCE: PThe centerrogram shall-maintains appropriate insurance for personnel, children enrolled, transportation services, and physical facilities. What is the regulatory requirement?
- C. TRANSPORTATION: Transportation of children to and/or from any centerprogram shall adhereadheres to the state law and the rules and regulations of the Rhode Island Registry of Motor Vehicles. CenterPrograms providing transportation shall have written policies regarding the transport of children to and from the centerprogram.

Need for specific reference and hyperlink to DCYF Policy?

D. DISCIPLINARY POLICY: Each centerprogram shall develops disciplinary policies whichpolicies that shall beare given to parents and staff. These policies shall beare based on an understanding of the individual needs and development of the child.

## E. Release of Cehildren:

- 1. Parents/guardians-will sign in and sign out on the release of the child.
- Children shall are only be released to the parent or to an individual who is authorized by the parent to pick up the child and whose identity can be verified by a proper identification card bearing his/her photograph.
- 3. The centerprogram shall develops written policies and procedures regarding the release of children to persons other than the parent. These policies shall beare given to parents and staff and shall includecentain the following:
  - a. Procedure for documenting any custody or restraining orders relating to the child;
  - b. Procedure for maintaining current written parental authorization for the release of the child to named individuals, updated at least annually:
  - c. Procedure for verification of identity of authorized individuals, including picture identification;
  - d. Procedure for handling emergency call-in authorization by the parent, including verification of the identity of the parent over the penne:
  - Children are not released to an adult under the influence.
     (program establishes procedure as to who a child is released to in this circumstance).

## F. Program Ppolicies and Pprocedures:

- 1. The centerprogram shall havehas written policies and procedures whichprocedures that shall beare given to parents and staff.
- Enrollment policy and fee for services shall beare explained to all parents and staff.
- 3. Policies and procedures shall include information on:
  - a. cChild, family, and staff orientation programs;
  - b. mMedical emergency and sick child procedures:
  - c. cClassroom management;
  - d. cCalendar, program closing, hours of operation;
  - d.e. sSchedule of daily activities;
  - e.f. cCurriculum goals and philosophy;
  - f.g. pProgram evaluation;
  - g.h. cChildren's records requirements;

- h.i. e Evaluation of children;
- i-i. sSupervision of children;
- i.k. pProcedure for reporting cases of child abuse and neglect.

#### G. Personnel Ppolicies and Pprocedures:

- A written statement of personnel policies and practices shall be is developed and shall be made available to all employees.
- This statement shall beis used in the orientation of new staff members and shall contains the following:
  - a. jdob descriptions and qualifications for employment;
  - a.b. -dDefined time and procedure for staff evaluation;
  - b.c. e€mployment benefits;
  - e.d. eEstablished channels for complaints and suggestions:
  - d.e. e stablished work day, work week, and scheduling of staff;
  - e-f. e-stablished salary and wage scales;
  - f.g. pProcedures for disciplinary action and termination; and
  - g.h. sStaff training.

#### Record-keeping:

- An appropriate system of record-keeping shall be setablished; and suitable files hard copy and/or electronic files maintained, and space shall be provided within the centerprogram facility for the various records to be maintained.
  - Provision shall beis made for the protection of records and reports as well as for insuring their confidentiality where applicable.
  - 2. An individual file is maintained for each staff member. This file contains the followingStaff files: An individual file shall be maintained for each staff member. This file shall contain the following:
    - a.pPersonal data sheet or application containing the employee's name, age, home address, phone,
    - b.a. education and work experience;
    - e.b. jJob description;
    - d.c. fFingerprinting documentation and results of criminal record check and CANTS-CPS check.
    - e.d. nNotarized Employment History and Criminal Record Affidavits:
    - <u>f.e.</u> <u>d</u>Documentation of employment history verification;
    - e.f. hHealth documents:
    - h.g. aAttendance record:
    - i.h. sStaff performance evaluations;
    - i. dDocumentation of qualifications;
    - k-j. sStaff training plan and documentation of participation in staff training; and
    - Lk. sStatement at time of leaving employment.
  - CHILDREN'S FILES: A file shall be maintained on each child. This file shall be kept current and shall includes the following:
    - a. aAn application form completed by the parent/guardian containing the child's name, birth date, parent/guardian's name, current address and phone number and, and work or school address and phone number;
    - b. <u>d</u>Date of enrollment;
    - c. <a href="https://ht
    - d. pertinent social information on the child;

- e. <u>w</u>Written authorization from the parent/guardian for emergency medical treatment:
- f. www.ritten reports of injuries, accidents, or illness occurring while the child is in the centerprogram and the treatment given;
- g. <u>i</u>Information pertaining to the child's progress, growth and development, <u>including IEP information</u>, as relevant; specifying special needs and interventions as well as program plans and goals.
- h. wwwritten authorization from the parent/guardian for the child to participate in and be transported for field trips and other special activities that are not part of the centerprogram's daily program;
- i. nNames of individuals to whom the child may be released;
- j. <u>p</u>Parents/guardians-shall have access to their child's records.
- 4. INFANT/TODDLER FILES: In addition to the above information, centerprograms serving infants and toddlers shall also-obtain information, in writing, which will aid the staff in individualizing the program for each child, This shall includinges:
  - a. <u>d</u>Developmental and health history;
  - b. <u>h</u>Habits of feeding, foods used, and a schedule for introducing new foods;
  - c. t\(\pi\)oilet and diapering habits and procedures;
  - d. <u>s</u>Sleep and napping habits;
  - e. cchild's way of communication and being comforted;
  - f. <u>p</u>Play interests and habits;
  - g. pPersonality and temperament specifics.
- I. Children with SPECIAL NEEDS: Program staff will work collaboratively with Early Intervention and special education providers, and in partnership with the family, to support children's health; safety; and early learning and development. Centers serving children with special needs shall establish a formal written agreement with the early intervention program or the preschool special education program which provides services to the child and family. This agreement shall delineate the responsibilities of the center and the early intervention or preschool special education program in relation to the child and family.

#### Confidentiality: Children's records shall be kept confidential.

- J. The programs hasve a confidentiality policy that requires all employees, consultants and volunteers to maintain confidentiality of child, family, and personnel information included in files, conversations, observations, meetings, correspondence, social media, cell phones or any other source.—What staff information is meant here?
  - 1. Information contained in a child's record shall is only be released with written authorization from the child's parent/guardian.
  - 2. The centerprogram shall-maintains such authorization on file.
  - 3. The program has procedures to ensure the appropriate implementation of this policy.

#### K. Volunteers

- 1. So if it is all volunteers, why not say so? A file is maintained for each volunteer.
- This file is kept current and includes the following:
  - a. a personnel record maintained by the program:
  - an application for volunteering that includes signing a statement
     that individual does not have a criminal record or a
     communicable disease;

- documentation of the volunteer orientation to the program and the volunteer assignment;
- d. documentation (whose?) that the volunteer understands he or she always works under the supervision of program staff and is never left alone with children or engages in any disciplinary action with a child.
- 3. The above requirements apply to volunteers who are used on a routine basis as opposed to those who are only involved on an episodic basis, (e.g., for a party, field trip).
- <u>PROGRAM EVALUATION:</u> At least annually, <u>parentsfamilies</u>, staff, and other professionals <u>shall be are involved in evaluateing</u> the program's effectiveness in meeting the needs of the children.
- M. <u>CAPACITY:</u> The <u>centerprogram</u> <u>shall does</u> not exceed the licensed capacity at any time.

LICENSE: The Child Care Center License shall be displayed in a prominent place.

CLOSURE: When a center discontinues its operation, the owner or director shall provide written notification to the Department at least 30 days prior to the closure. Isn't this already covered above?

#### Emergency preparedness

- N. Facilities develop and implement a written plan that describes the practices and procedures they used to prepare for and respond to emergency or disaster situations.
  - 1. Emergency planning in is individualized to program and hours of operation.
  - 2. Emergency plan includes procedures for:
    - a. serious injuries or illnesses;
    - b. suspected child poisonings and known exposure to toxic substances;
    - c. outbreaks of infectious diseases, including pandemic influenza;
    - weather conditions, including tornados, floods, blizzards, hurricanes, and ice storms:
    - e. fires, including wildfires;
    - f. man-made disasters, including chemical and industrial accidents;
    - g. human threats, including bomb threats and terrorist attacks;
    - h. potentially violent situations in program, including individuals with threatening behaviors;
    - i. lost or abducted children;
    - <u>utility disruption, including electricity, water, and phone;</u>
    - other natural or man-made disasters that could create structural damage ;
    - k. to the facility or pose health hazards.
  - Emergency plan includes procedures for addressing child needs, with additional considerations for children:
    - a. two years of age and younger; and
    - with disabilities, developmental delays or chronic medical conditions, including individualized evacuation plan for children.
  - 4. Emergency plan includes procedures for personnel to account for each child location on a continual basis during emergencies.
  - Emergency plan includes shelter-in-place procedures for short or extended stay situations that require children to stay in the building, such as tornados and other weather emergencies.

- 6. Emergency plan includes lock-down procedures for situations threatening the safety of children and personnel, such as shootings, hostages, or intruders. Lock-down procedures include:
  - a. notifying personnel;
  - b. keeping children in designated safe locations in the building;
  - c. encouraging children to remain calm and quiet;
  - d. securing building entrances; and
  - e. ensuring unauthorized individuals do not enter the building.
- 7. Emergency plan includes evacuation procedures for situations that require children leave the building, such as a fire. Evacuation procedures include:
  - a. evacuation routes; and
  - b. pre-determined meeting location(s).
- 8. Emergency plan includes relocation procedures for situations that require children move to an alternate location, such as a bomb threat or wildfire.

# VII. SIX: CURRICULUMPROGRAM

GOAL: The curriculum provides for all areas of a child's development - physical, emotional, social and cognitive.

#### A. Curriculum:

- The curriculum shall-clearly evidence demonstrates an understanding of the needs of children and provide for their growth through enriching and stimulating experiences, suited to their age levels and stages of development.
- The curriculum It shall includes:
  - \_a. \_\_developmentally appropriate activities, including daily physical activity;
  - -b. daily schedule:
  - <u>□c.</u> classroom environment (and materials);
  - <u>-d.</u> physical activity;
  - e. nurturing relationships; and
  - ⊕f. family partnerships.
  - •family partnerships.

PRESCHOOL DAILY SCHEDULE: The written daily schedule shall provide a balance of activities on the following dimensions:

- •Indoor/outdoor
- •Quiet/active
- •Individual/small group/large group
- •Large muscle/small muscle
- Child initiated/staff initiated

#### B. Planning

- 1. There is a written method of documented planning in each classroom that details classroom plans a weekly basis, and is informed by the Rhode Island Early Learning and Development Standards which are found where?, (http://www.earlylearningri.org/).
- 2. Planning is the responsibility of the education coordinator.
- 3. At least once a month, the education coordinator meets with each teacher to consult on program planning and to assist in the planning for individual children.
- Classroom teachers share this information with staff and plan for individual children's needs and growth. Planning includes child directed activities.

- 5. Documentation of planning is kept onsite for at least the previous three months to demonstrate each classrooms use of planning documentation.
- C. Developmentally appropriate activities: The program shall-provides a variety of developmentally appropriate activities, guided by the Rhode Island Early Learning and Development Standards, and related and materials, that are selected to emphasize concrete experiential learning through play to achieve the following goals:

a. \_\_\_\_

- 1. promote learning through spontaneous and directed play activities;
- <u>■2.</u> <u>e</u>Enhance each child's unique potential for learning <u>across all</u> developmental domains;
- •Increase each child's use of language and communication skills and support emergent literacy;
- Foster physical and motor development
- Promote learning through spontaneous and directed play activities
- •Encourage the development of appropriate emotional attitudes and social skills
- Foster a positive self-image
- Foster trust relationships with adults
- Encourage the child's developing sense of autonomy and independence
- •Encourage an interest and curiosity about the world an instill basic concepts and root academic learning Expand the child's capacity for independent thinking, exploration, and problem solving
- Encourage sound health, safety and nutritional practices.
- 3. foster each child's physical health, development and coordination;
- 4. support each child's social and emotional development, including trusting relationships with adults;
- support each child's language development, communication and emergent literacy skills; and
- <u>Gognition</u>, executive function and approaches to learning (cognition and general knowledge).

TODDLER AND PRESCHOOL PROGRAM COMPONENTS: The program provides areas to accommodate and encourage small group and/or individual including:

- Block Building
- Socio-dramatic play
- Art
- Music
- Science
- Math
- Manipulatives
- Book reading
- Writing

PARENT INVOLVEMENT: The program shall offer opportunities for the parents to s hare in their children's learning experiences.

PROGRAM FLEXIBILITY: All programs shall follow a regular daily schedule. However, planned or routine activities shall be changed to meet the interests and needs of the children or to cope with weather changes or other situations which affect routines.

D. Daily Schedule (Process)

- 1. INFANT/TODDLER PROGRAM: The infant/toddler program shall evidencedemonstrates an understanding of the needs and development of very young children by providing experiences and environments whichenvironments that goes beyond basic care and supervision.
- 2. The program shall provides experiences which experiences that will foster the development of trusting relationships between adult and child.
- Infant programs shall schedule the sameconsistent staff with the intent of developing and maintaining warm, reciprocal relationships between adults and children.
- 4. The program shall provides an environment that promotes respect for individual feeding, sleeping and diapering patterns.
- The physical needs of the children shall receive prompt attention.
- Daily routines of feeding and diapering shall provide opportunities for learning (e.g. mirrors, mobiles, toys, language input, etc.). What does this mean?
- 7. The program shall provides activities that promote each of the following on a daily basis:
  - a. \_a.-|Language acquisition by statements of happenings, songs, stories, poems, finger-plays;
  - b. b. cCognitive/sensory learning by stimulation of the senses of sight, hearing, taste, smell, and touch;
  - c. e. gGross motor skills;
  - d. d. fFine motor skills; and
  - e. e. tTummy time. What does this mean?
- 8. TODDLER/PRESCHOOL PROGRAM: Teaching staff shall post and follow a regular daily schedule. The schedule shall provides a balance of activities and experiences, which incorporate a combination of the following activities and -are child-initiated and staff-initiated, and experiences each day including:
  - a. indoor and outdoor;
  - b. quiet and active;
  - c. large group, small group and individual;
  - d. large muscle and small muscle; and
  - e.child-initiated and staff-initiated. What does this mean?
- 9. PHYSICAL ACTIVITY: Staff promote children's active play and participate with children when physically able to do so for at least an hour each day. The indoor and outdoor environment shall bothis be utilized for all children to engage in physical activity each day. So is this a regulatory requirement or not?
- 10. QUIET OR RESTING/SLEEPING: Programs shall provide regular periods of quiet activity or resting/sleeping appropriate to the needs of the children.
- 11. Infants and toddlers shall beare in cribs only for rest or sleep.
- 12. Preschool children shall beare on cots only for rest or sleep.
- There shall beare no restraining devices of any type used in a crib or elsewhere unless prescribed by a physician or other appropriately licensed/certified professional.
- 14. For children who are unable to sleep, or do not wish to sleep, the program provides time and space for quiet, supervised play.
- <u>Children shall not be forced to.</u> Provider <u>shall havehas</u> a sleep plan appropriate to the needs of each child. There <u>should beis</u> no forced sleep or wakefulness.

- 16. PROGRAM FLEXIBILITY: All programs shall follow a regular daily schedule. However, planned or routine activities shall beare changed to meet the interests and needs of the children or to cope with weather changes or other situations which situations that affect routines.
- E. Classroom Environment and Materials (Context) Meaning?
  - 1. All equipment and materials used in the program are:
    - a. safe;
    - b. durable;
    - c. appropriate for the age level of the children and stage of development;
    - d. sufficient in quantity for the number of children enrolled;
    - e. accessible to the children;
    - f. promoteing exploration;
    - g. represent a variety of racial, cultural, linguistic, gender, ability, and age attributes;
    - h. trampolines are prohibited;
    - i. materials which require staff supervision are stored out of children's reach.
  - 2. INFANT/TODDLER ENVIRONMENT: The indoor and outdoor environments shall beare organized so as to provide the children with ample opportunity for freedom of movement and exploration in safe, clean, open and uncluttered areas.
    - a. Non-mobile infants shall-beare positioned to permit a wide range of visual stimulus.
    - <u>b.</u> Positioning <u>shall beis</u> varied throughout the day.
    - c. Ambulatory infants and toddlers shall beare permitted to freely explore a planned environment which provides opportunities to utilize their emerging skills to crawl, climb, pull to a stand, and walk.
  - Materials are provided which stimulate infant development. A selection
     of the following types of play things are provided including but not limited
    - to:
    - a. blocks;
    - b. busy boards;
    - c. balls;
    - d. cuddly toys;
    - e. pull toys;
    - f. sorting toys;
    - g. kitchen toys:
    - h. musical and auditory stimulation toys;
    - i. nesting and stacking toys;
    - rattles and squeeze toys;
    - k. mirrors:
    - books;
    - m. mobiles and cradle gyms;
    - n. climbing equipment;
    - o. riding toys.
  - 4. The indoor and outdoor environment is organized and equipped with clearly defined learning areas which include, at a minimum, areas devoted to:
    - a. construction;

- b. dramatic play;
- c. discovery,
- d. sensory play;
- e. books;
- f. large motor activity;
- g. manipulatives; and
- h. creative expression, including music.

## F. Nurturing Relationships (Teaching and Facilitating) — Meaning?

- Staff:
  - a. serve as a positive role model for the children in care:
  - b. use positive methods in guiding children back on task,
     encourage appropriate behavior, and set clear limits and rules that children can understand;
  - match their expectations with the children's developing abilities and capabilities;
  - d. praise the children's accomplishments as well as their attempts at tasks;
  - e. use positive, firm limit setting in situations where a child's safety is at stake;
  - f. assist children by redirecting them from inappropriate actions to activities that are more favorable;
  - g. create a positive environment through their own behaviors such
     as frequent social conversations with children, joint laughter and
     affection, eye contact, tone of voice and smiles;
  - h. develop individual relationships with children by providing care that is responsive, attentive, consistent, comforting, supportive, and culturally sensitive.
- When a child presents challenging behavior, staff:
  - a. observe the child;
  - b. identify events, activities, interactions and other factors that predict and may contribute to the challenging behavior;
  - c. use this information to assist the child;
  - d. work together with families on behalf of their child;
  - e. support families in accessing services and outside resources, when necessary.

# VIII. SEVEN: FAMILY ENGAGEMENT PARENT-CENTER RELATIONS

**GOAL:** Parents are supported in their role of primary care-giver and are informed and encouraged, through a variety of means, to interact with the center and its programs.

- A. OPEN DOOR POLICY: The centerprogram shall be open to families parents for observation and visits whenever the program is in operation.
- B. Preadmission family conference:
  - 1. Preadmission conferences shall beare scheduled to secure health and family history, to obtain background information on the child and his/her home, and to develop the child's program.
  - 2. The completion of these conferences is documented.
  - Areas of discussion-could includes: what is the regulatory requirement
    - a. child's strengths and needs
    - b. families goals for a child

- c. family history and background
- 4. Necessary supports and accommodations to ensure the child's health, safety, early learning and development.
  - For children with special needs enrolled through an integrated group placement, the preadmission conference shall involve the family and the early intervention consultant, and shall include discussion of any relevant developmental, medical, family, equipment, staffing and/or training needs which are essential for the child's placement.

For infants and toddlers with special needs enrolled through an integrated group placement, and Individual Family Service Plan (IFSP) meeting shall take place within 30 calendar days of the child's enrollment. Subsequent IFSP progress review meetings shall take place every at least six menths.

- <u>PREADMISSION VISITATION:</u> The <u>centerprogram</u> <u>shall</u> provides opportunities for the child and parent to visit the program one or more times before the child is enrolled.
- <u>C. PARENT-STAFF CONFERENCES:</u> There shall be program has a plan for family-staff conferences as a part of the center program.
  - 1. <u>CenterProgram</u>s operating infant/toddler programs shall develop a means of daily communication between staff and familiesparents.
  - 2. The information shared shall includes the following: references to the child's mood, health, feeding, sleeping, toileting, playing or other activities, particularly noting changes, disruptions or note-worthy occurrences at home or at the centerprogram.
- D. ON-GOING COMMUNICATION WITH FAMILIES: Families Parents shall be are informed about the centerprogram's program through the parent handbook, regular newsletters, bulletin boards, frequent notes, telephone calls, and other similar measures.
- E. The program offers opportunities for the families to be engaged in their child's early learning and development. These experiences are informed by the Rhode Island Early Learning and Development Standards and suited to the children's age and developmental levels.
- F. RESOURCE AND REFERRAL: The centerprogram shall maintains a directory of professional community services and shall makes relevant information available to families as indicated.
- G. Program staff work collaboratively with local school districts to ensure that all children have the opportunity to participate in child outreach screening.

  Programs domust not use the screening to label a child, determine a child's placement in the program, or deny a child's entrance into a program or to infer a child's readiness.

#### **EIGHT: ADMINISTRATION**

**GOAL:**\_The center is administered in a responsible manner and the staff is supported in their efforts to provide a high quality program.

**FINANCIAL RESOURCES**: Financial resources shall be such as to ensure the center's security in its own future and stability in the community.

**INSURANCE**: The center shall maintain appropriate insurance for personnel, children enrolled, transportation services, and physical facilities.

**TRANSPORTATION:** Transportation of children to and/or from any center shall adhere to the state law and the rules and regulations of the Rhode Island Registry of Motor Vehicles. Centers providing transportation shall have written policies regarding the transport of children to and from the center.

**DISCIPLINARY POLICY**: Each center shall develop disciplinary policies which shall be given to parents and staff. These policies shall be based on an understanding of the individual needs and development of the child.

**RELEASE OF CHILDREN**: Parents/guardians will sign in and sign out on the release of the child. Children shall only be released to the parent or to an individual who is authorized by the parent to pick up the child and whose identity can be verified by a proper identification card bearing his/her photograph.

The center shall develop written policies and procedures regarding the release of children to persons other than the parent. These policies shall be given to parents and staff and shall contain the following:

- e.Procedure for documenting any custody or restraining orders relating to the child:
- f.Procedure for maintaining current written parental authorization for the release of the child to named individuals, updated at least annually;
- g.Procedure for verification of identity of authorized individuals, including picture identification:
- h.Procedure for handling emergency call-in authorization by the parent, including verification of the identity of the parent over the Phone.
- i.Children shall not be released to an adult under the influence. (procedure established as to who a child should be released to in this circumstance.)

PROGRAM POLICIES AND PROCEDURES: The center shall have written policies and procedures which shall be given to parents and staff. Enrollment policy and fee for services shall be explained to all parents and staff. Policies and procedures shall include information on:

k.Child, family, and staff orientation programs;

I.Medical emergency and sick child procedures;

m.Classroom management; Calendar, program closing, hours of operation;

n.Schedule of daily activities;

o.Curriculum goals and philosophy;

p.Program evaluation;

g.Children's records requirements:

r.Evaluation of children:

s.Supervision of children;

t.Procedure for reporting cases of child abuse and neglect.

**PERSONNEL POLICIES AND PROCEDURES:**A written statement of personnel policies and practices shall be developed and shall be made available to all employees. This statement shall be used in the orientation of new staff members and shall contain the following:

h.Job descriptions and qualifications for employment; Defined time and procedure for staff evaluation;

i.Employment benefits;

j. Established channels for complaints and suggestions;

k. Established work day, work week, and scheduling of staff;

I.Established salary and wage scales;

m.Procedures for disciplinary action and termination;

n.Staff training.

<u>CHILD ABUSE AND NEGLECT REPORTING</u>: Any suspected case of child abuse and/or neglect shall be reported to the Department of Children, Youth and Families within 24 hours (1-800-RICHILD) in accordance with state law, including any death or serious injury while in care of the center.

The center shall report also report to the Child Care Licensing Office immediately after reporting to CPS (1-800-RI-CHILD).

**RECORD-KEEPING:** An appropriate system of record-keeping shall be established; hard copy and/or electronic files maintained,\_and space shall be provided within the center facility for the various records to be maintained. Provision shall be made for the protection of records and reports as well as for insuring their confidentiality where applicable.

**STAFF FILES**: An individual file shall be maintained for each staff member. This file shall contain the following:

m.Personal data sheet or application containing the employee's name, age, home address, phone,

n.education and work experience;

o.Job description;

p.Fingerprinting documentation and results of criminal record check and CANTS CPS check:

g. Notarized Employment History and Criminal Record Affidavits;

r.Documentation of employment history verification;

s. Health documents;

t.Attendance record:

u.Staff performance evaluations;

v.Documentation of qualifications;

w.Staff training plan and documentation of participation in staff training;

x.Statement at time of leaving employment.

CHILDREN'S FILES: A file shall be maintained on each child. This file shall be kept current and shall include the following:

k.An application form completed by the parent/guardian containing the child's name, birth date, parent/guardian's name, current address and phone number, and work or school address and phone number;

I.Date of enrollment:

m.Health record which includes immunization data and physician's record of preadmission examination:

n.Pertinent social information on the child:

o. Written authorization from the parent/guardian for emergency medical treatment;

- p.Written reports of injuries, accidents, or illness occurring while the child is in the center and the treatment given;
- q.Information pertaining to the child's progress, growth and development, including IEP information, as relevant;
- r.Written authorization from the parent/guardian for the child to participate in and be transported for field trips and other special activities that are not part of the center's daily program;
- s.Names of individuals to whom the child may be released.
- t.Parents/guardians shall have access to their child's records.

**INFANT/TODDLER FILES**: In addition to the above information, centers serving infants and toddlers shall also obtain information, in writing, which will aid the staff in individualizing the program for each child. This shall include:

- h.Developmental and health history;
- i. Habits of feeding, foods used, and a schedule for introducing new foods;
- j. Toilet and diapering habits and procedures;
- k.Sleep and napping habits;
- I.Child's way of communication and being comforted;
- m.Play interests and habits;
- n.Personality and temperament specifics.

CHILDREN WITH DISABILITIES, DEVELOPMENTAL DELAYS AND SPECIAL HEALTH CARENEEDS: Program staff will work collaboratively with Early Intervention and Special Education Providers, and in partnership with the family, to support children's health; safety; and early learning and development.

**CONFIDENTIALITY**: The programs shall\_have a confidentiality policy that requires all employees, consultants and volunteers to maintain confidentiality of child, family, and staff information included in files, conversations, observations, meetings, correspondence, social media, cell phones\_or any other source. Information contained in a child's record shall only be released with written authorization from the child's parent/guardian. The center shall maintain such authorization on file. The program shall have procedures to ensure the appropriate implementation of this policy.

**VOLUNTEERS**: The following applies to volunteers, who are used on a routine basis as opposed to those who may be involved on an episodic basis, e.g., for a party, field trip, etc. A file shall be maintained for each volunteer. This file shall be kept current and include the following:

- a. A personnel record maintained by the program
- b. An application for volunteering that shall include signing a statement that they do not have a criminal record or a communicable disease
- c. Documentation of the volunteer orientation to the program and the volunteer assignment
- d. Documentation of understanding that the volunteer must always work under the supervision of program staff and never be left alone with children or engage in any disciplinary action with a child.

**PROGRAM EVALUATION:** At least annually, families, staff, and other professionals shall be involved in evaluating the program's effectiveness in meeting the needs of the children.

CAPACITY: The center shall not exceed the licensed capacity at any time.

LICENSE: The Child Care Center License shall be displayed in a prominent place.

**CLOSURE:** When a center discontinues its operation, the owner or director shall provide written notification to the Department at least 30 days prior to the closure.

**EMERGENCY PREPAREDNESS**: Facilities should develop and implement a written plan that describes the practices and procedures they use to prepare for and respond to emergency or disaster situations.

- a. General. Emergency planincludes procedures described in this section and individualized to program and hours of operation;
- b. is followed, unless children's safety is at risk.
- c. Emergency plan includes procedures for:
  - i. serious injuries or illnesses;
  - ii. suspected child poisonings and known exposure to toxic substances;
  - iii. outbreaks of infectious diseases, including pandemic influenza;
  - iv. weather conditions, including tornados, floods, blizzards, hurricanes, and ice storms;
  - v. fires, including wildfires
  - vi. man-made disasters, including chemical and industrial accidents;
  - vii. human threats, including bomb threats and terrorist attacks;
  - viii. potentially violent situations in program, including individuals with threatening behaviors;
  - ix. lost or abducted children;
  - x. utility disruption, including electricity, water, and phone;
  - xi. other natural or man-made disasters that could create structural damage
    - to facility or pose health hazards.
- d.\_Child needs. Emergency plan includes procedures for addressing child needs, with additional considerations for children:
  - i. two years of age and younger; and
- ii. with\_disabilities, developmental delays\_or chronic medical conditions, including individualized evacuation plan for children .
- e. Account for children. Emergency plan includes procedures for personnel to account for each child location on a continual basis during emergencies.
- f. Shelter-in-place. Emergency plan includes shelter-in-place procedures for short or extended stay situations that require children to stay in the building such as tornados and other weather emergencies.
- g. Lock-down. Emergency plan includes lock-down procedures for situations threatening the safety of children and personnel, such as shootings, hostages, or intruders. Lock-down procedures include:
  - i. notifying personnel;
  - i. keeping children in designated safe locations in the building;
  - iii. encouraging children to remain calm and quiet;
  - iv. securing building entrances; and
  - v. ensuring unauthorized individuals do not enter the building.
- h.\_Evacuation. Emergency plan includes evacuation procedures for situations that require children leave the building, such as a fire. Evacuation procedures include:
  - i. evacuation routes; and
  - ii. pre-determined meeting location(s).

i. Relocation and parent reunification. Emergency plan includes relocation procedures for situations that require children move to an alternate location, such as a bomb threat or wildfire.

# IX. III. APPENDIX

# CRIMINAL RECORDS BACKGROUND CHECKS -DISQUALIFYING INFORMATION

Information contained in the national criminal identification computer pertaining to conviction or arrest pending disposition for the crimes identified below will result in a letter to the individual disqualifying them from employment in a child care center. I assume that this syncs exactly with the latest promulgated version?

Offenses against the Person

Murder

Voluntary Manslaughter

Involuntary Manslaughter

**Kidnapping** 

Kidnapping with intent to extort

First degree sexual assault

Second degree sexual assault Third degree sexual assault

Assault by spouse

Assault with intent to commit specified felonies

Felony assault

Domestic assault

First degree child abuse

Second degree child abuse Offenses Against the Family

Incest

Child snatching

Exploitation for commercial or immoral purposes

Public Indecency

Transportation for indecent purposes:

Harboring

**Prostitution Pandering** 

Deriving support or maintenance from prostitution

Circulation of obscene publications and shows

Sale or exhibition to minors of indecent publications, pictures or articles

Child nudity in publication

**Drug Offenses** 

Any offense constituting a felony which is enumerated in Rhode Island General Law 21-28-1.01 et seq., the Uniform Controlled Substances Act. Disqualifying Information

The arrest and conviction\* or arrest pending disposition for one of the criminal offenses listed below or for any offense, which involves elements of proof that are substantially similar to the offenses listed below, disqualifies an individual from serving in a child caring capacity in a program or service operated by or for DCYF and/or requiring licensure or certification by DCYF or residing in a household wherein such a program or service is provided or from owing or operating any such program or service or from serving as a DCYF employee, intern, volunteer or consultant or from functioning in any other capacity subject to a statewide or nationwide criminal record background check in accordance with federal and/or state law or DCYF rule.

\*For purposes of this protocol, "conviction" means a judgment of conviction entered by a court subsequent to a finding of guilty. Further, any case where a defendant has entered a plea of nolo contendere and has received a sentence that includes a fine and/or a period of incarceration constitutes a conviction. Any instance where the defendant has entered a plea of nolo contendere and has received a sentence of only probation constitutes a conviction while the probationary period is pending.

## LEVEL 1 OFFENSES

If an individual is disqualified for the arrest and/or conviction for any of the following offenses, that individual has a right to appeal for the purpose of demonstrating that he or she has not been arrested and/or convicted for such an offense.

- Felony Child Abuse or Neglect
- Felony Domestic Violence
- Felony committed against a child
  - 1st Degree Child Molestation
  - 2nd Degree Child Molestation
  - Child Pornography
  - Circulation of obscene publications and shows
  - Sale or exhibition to minor of indecent publications, pictures or articles
  - Child nudity in publication
  - Transportation for Indecent purposes
  - Harboring
  - Prostitution
  - Pandering
  - Deriving support or maintenance from prostitution
- Felony Drug Offense committed less than five years ago
- Felony involving violence
  - Murder
  - Manslaughter
  - Rape
  - 1st Degree Sexual Assault
  - 2nd Degree Sexual Assault
  - Kidnapping
  - Car-jacking
  - 1st Degree Arson
  - 2nd Degree Arson
  - Mayhem
  - Felony Assault committed less than five years ago
  - Felony Battery committed less than five years ago

# **LEVEL 2 OFFENSES**

If an individual is disqualified for the arrest and/or conviction for any of the following offenses, that individual has a right to appeal for the purpose of demonstrating his or her long standing record of excellence in child care:

- Felony Assault committed over five years ago
- Felony Battery committed over five years ago

- Felony Drug Offense committed over five years ago
- Robbery
- Breaking and Entering
- Burglary
- I<u>llegal Possession of a Firearm</u>
- Misdemeanor Domestic Assault
- 3rd Degree Sexual Assault

If an individual is disqualified for the arrest and/or conviction for any of the following offenses, when the offense does not involve a child, that individual has a right to appeal for the purpose of demonstrating his or her long standing record of excellence in child care:

- Transportation for Indecent purposes
- Harboring
- Prostitution
- Pandering
- Deriving support or maintenance from prostitution
- Circulation of obscene publications and show

# CLEARANCE OF AGENCY ACTIVITY-ADDENDUM, DISQUALIFYING INFORMATION

## **CANTS CHECK ADDENDUM - DISQUALIFYING INFORMATION**

When the applicant/employee has been identified as the indicated perpetrator in a Child Abuse and Neglect Tracking System (CANTS) investigation and the final finding(s) of the investigation is listed below, the applicant/employee will be disqualified from assuming child care duties in a child care facility:

An applicant, who has been identified as an indicated perpetrator of a Child Protective Services (CPS) Investigation with a final finding of an allegation listed below, is disqualified from owning or seeking employment in a child care facility, receiving a license to provide care for a child or serving in any other role subject to Department clearance.

# **Indicated Abuse or Neglect Findings**

**Death** 

Brain Damage/Skull Fracture

Subdural Hematoma

Internal Injury

Drug/Alcohol Abuse*
Sexually Transmitted Disease
Sexual Intercourse
Sexual Exploitation
Sexual Molestation
Failure to Thrive
Indicated Abuse Findings
Burn/Scalding
<u>Poisoning</u>
<u>Wound</u>
Bone Fracture
Excessive/Inappropriate Discipline*
Cut/Bruise/Welt*
Human Bite
Sprain/Dislocation
*In limited situations, involving incidents in which there is no serious physical injury to a child, there can be an administrative determination that, notwithstanding an indication of one of these three allegations, the individual will not be disqualified from employment or licensing.
In instances where CPS involvement is noted, but not specified above, the applicant is not automatically disqualified from seeking employment or a license. The decision to hire remains with the employer. The decision to license remains with the Department.
INDICATED FINDINGS
— + Death (#1)
+ brain damage/skull fracture (#2) + subdural hematoma (#3)
— ı internal injuries (#4)
+ alnutrition/starvation (#8) + venereal disease (#30)

Malnutrition/Starvation

- + sexual intercourse (#31)
+ sexual exploitation (#32)
- + sexual molestation (#33)
- + failure to thrive (#48 )
INDICATED ABUSE FINDINGS ONLY
— + burns/scalding (#5)
— + poisoning (#6)
— + wounds (#7)
+ bone fractures (#9)
+ excessive/inappropriate discipline (#10) + cuts/bruisesiwel ts (#11)
— + human bites (#12)
- + sprains/dislocations (#13)
In those instances in which CANTS involvement is noted but not specified above, the

applicant/employee is not disqualified from assuming child care duties.